PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000029730 (7)

CLOTHING CONCEPTS OF AMERICA, INC.

FILED May 08 1998 8:00am Secretary of State



| | | | | | | . | |
|---|---|----------------------------|-----------------------|---------------|---|-----------------------------|--------------------|
| Principal Place of Business Mailing Address | | | | | |) 4414 SSH4 (1815 1814 1846 | 41141 #811 1984 |
| . 15300 NW 33RD PL. MIAMI FL 33054 | | 15300 NW 33RD PL. | | | | | |
| MINNETE | NU.04 | MIAMI FL 33054 | | | DO NOT WRIT | E IN THIS SPACE | |
| <u> </u> | | | | | 3. Date Incorporated or Qualified | | |
| | | | | | 04/22/1993 | - | |
| | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | oplied For |
| 21 | H ata | 26 | | | 65-0401560 | | ot Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apr. #, etc. | | 6. Certificate of Status Desired | | Additional equired |
| - City & State | | Crty & State | | | 6. Election Campaign Financing | | May Be |
| 23 | | 28 | ח בי | | Trust Fund Contribution | | to Fees |
| Zip | Country | Zip | Countr | у | 8. This corporation owes or has p | | |
| 24 | 25 | 29 | 30 | | Personal Property Tax due June 30. Yes No | | |
| | g, Name and Address of Curre | nt Registered Agent | | 1 | 10. Name and Address of New Ro | agistered Agent | |
| | EVY, RANDALL | | 61 | Name | | | |
| | 60 BELAIRE DR W | | 82 | Street | Address (P.O. Box Number is Not Accepta | ble) | |
| ' | PEMBROKE PINES FL 33027 | | 83 | | | | |
| } | | | | | | | |
| | | | 84 | City | | FL 85 Zip | Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Statu of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered | | | | | | | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. | | | | | | | |
| SIGNATURE | | | | | | | |
| Signature, typed or printed name of registered agent and Info if applicable (NOTE: Regis | | | | ent signature | required when reinstating) | DATE | |
| 12. | PSD OFFICERS AN | OFFICERS AND DIRECTORS 13. | | | ADDITIONS/CHANGES TO OFFI | Change | RS IN 12 |
| NAME | LEVY, RANDALL | LJ Meete | 1.1 TITLE 1.2 NAME | j | RONOFF, BRIAN C. | Change | L Rudilloll |
| STREET ADDRESS | A. C. | | 1.3 STREET ADDRESS | | 21208 YAGAT C | 646 DR. | 1 |
| CITY-ST-Z#P | DEMONDONE DAMES EL | | 1.4 CITY- | ST- 7IP | an trans | 33180 | |
| TITLE | | | 21 TITLE | · · · · · · | 1 | Change | Addition |
| NAME | rosen, Benjamin | | 2.2 NAME | | | | |
| STREET ADDRESS | 5600 COLLINS AVE | | 2.3 STREE | T ADDRESS | | | |
| CHY-\$1-21P | | | 2.4 CITY- | ST-ZIP | | ··· | |
| TITLE | | DELETE | 3.1 TITLE | ļ | | Change | Addition |
| Mile: | | | 3.2 NAME | | | | ļ |
| STREET ADDRESS | | | 1 | ADDRESS | | | |
| CITY-\$T-ZIP | - | 1 1 DELETE | 3.4. CITY- | 01-ZIP | | Change | Addition |
| NAME | | | 4. 2 NAME | ì | | 0.myo | |
| STREET ADDRESS | | | | ADDRESS | | | |
| CITY-ST-ZW | | | 4.4 CITY- | 1 | | | j |
| TITLE | | DELETE | 5.1 TITLE | | | ☐ Change | Addition |
| NAME | | | 5.2 NAME | } | | | } |
| STREET ADDRESS | | | 5.3 STREE | ADDRESS | | |] |
| CFTY-ST-ZIP | | | 5.4 CiTY- | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | J | | ☐ Change | Addition |
| NAME | | | 6.2 NAME | | 1 | | ļ |
| STREET ADDRESS | | | | ADDRESS | | | |
| CITY-ST-ZIP | and it, that the information arrested as | 34 A.S. 600 - A | 6.4 CITY- | ST-ZIP | | 1 6 mail | 1.77 |

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

GNATURE:

4-10-98 . 305-685-3440