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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS

| DOCUMENT # 1. Corporation Name | P93000036001 | (4) |
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| GTA APPAREL GROUP, INC. | | | | | | | | |
|--|--|-------------------------------|---|--|--|--|--|------------------------------|
| Principal Place | of Business | Mailing Ad | idress | | | E CONTROL FOR CONTROL SOUR COURT ONLY | N 99 111 93190 1111 7 9 417 1 | INA UUU HUI HUR |
| 11700 NW 11 2601 SOUTH MEDLEY FL US | I BAYSHORE DRIVE. SUITE 1600 | 2601 S | NW 102ND RO OUTH BAYSH Y FL 33178 | OAD ORE DRIVE. SI | JITE 1600 | Date Incorporated or Qualified | 3s. Date of Last | Report |
| | | | | | | 05/19/1993 | 05/01/1 | 1995 |
| 2. Principal Pia I | ice of Business | 2a. Mailing | Address | | | 4. FEI Number | | Applied For |
| [1] Como Ardia | | 26 | | | | 65-0414655 | | Not Applicable |
| Suite, Apt. # | r, etc | 27 Suite, / | Apt. #, etc. | | | 5. Certificate of Status Desired | T T T T T T T T T T T T T T T T T T T | 5 Additional |
| City & State | | City & | State | | | E Floation Campaign Francisco | | Required |
| 3 | | 28 | Oldic | | | Election Campaign Financing Trust Fund Contribution | | 00 May Be led to Fees |
| ∴ι | Country | Zip | | Countr | | 8. This corporation has liability for i | | |
| 4 | 25 | 29 | | 30 | | Florida Statutes Yes | | 0 100.002, |
| | 9. Name and Address of Curre | nt Registered A | gent | | | 10. Name and Address of New R | egistered Agent | |
| | | | | 81 | Name | | | |
| A Z REC | GISTERED AGENT CORPORATI | ION | | 82 | Street Addi | ess (P.O. Box Number is Not Acceptab | le) | |
| 2601 SC | OUTH BAYSHORE DRIVE | | | | | | | |
| SUITE 1 | 1600 | | | 83 | | | | |
| MIAMI F | FL 33131 | | | 84 | City | | 85 | Zip Code |
| | | | | | ' ' | | FLII | • |
| Tarrillar Will SIGNATHER | h, and accept the obligations of, Sec Signature, based or printed manife of registered again | otion 607.0505, Fi | onda Statutes | S. OTE: Rogistered Age | | ation submits this statement for the pur of of directors. I hereby accept the appo d when reinstating) | DATE | ac agent. I am |
| 12. | OFFICERS AN | ND DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFF | CERS AND DIRECT | ORS IN 12 |
| ITLE | D | [| □ DELETE | 1. 1 TITLE | | | Change | Addition |
| AME | gerwit, Kenneth | | | 1.2 NAME | | | | |
| TREET ADDRESS | 2896 BIRKDALE | | | 1.2 61055 | T ADDRESS | | | |
| | FT LAUDERDALE FL 33332 | | | 1.5 SINCE | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| | THE TOOPED PAGE IT 39995 | | | 1.4 CiTY- | | | | |
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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 trustee 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.

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

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