

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000042245

FILED
Aug 27, 2008
Secretary of State

Entity Name: VACATION CLOTHING EXCHANGE, INC.

Current Principal Place of Business:

2779 NW 31ST AVENUE
LAUDERDALE LAKES, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

2778 NW 31ST AVENUE
LAUDERDALE LAKES, FL 33311 US

New Mailing Address:

FEI Number: 65-0416646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMAL, RALPH
8830 COCO PLUM MANOR
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: JAMAL, RALPH
Address: 8830 COCO PLUM MANOR
City-St-Zip: PLANTATION, FL

Title: VD () Delete
Name: PEREMUTER, BENJAMIN
Address: 2709 PARKVIEW DRIVE
City-St-Zip: HALLANDALE, FL

Title: TD () Delete
Name: LEVY, CLAUDE
Address: 10042 NW 2ND ST
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH JAMAL

Electronic Signature of Signing Officer or Director

OWNE

08/27/2008

Date