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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # POSOCOSTOST (2)

FILED Mar 06 1998 8:00am Secretary of State

	EACHWEAR, INC.	0000007 (2)				
Principal Place of Business 7670 INTERNATIONAL DRIVE #100 ORLANDO FL 32819		Mailing Address			tur darar diest Berie Saldt Sil)
		9575 WELDON CIRCLE				
US	32018	C-109 Tamarac Fl 33321		DO NOT WRITI	E IN THIS SPACE	
		US		3. Date Incorporated or Qualified		
				07/28/1993		İ
<u> </u>	lace of Business	2a. Mailing Address		4. FEI Number	Ar	oplied For
21		26		59-3199547	No	ot Applicable
Suite, Apt. #, etc 22		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional
City & State	<u> </u>	City & State				equired
23	-	28		6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	7(0)	Country	8. This corporation owes or has pa		
24	25	29	30	Personal Property Tax due June		No I
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Re		
	NCHER, OCHWALW SEZIL	17N W.	81 Name			
9575 WELDON CIRCLE C-109 TAMARAC FL 33321			B2 Street Add	ress (P.O. Box Number is Not Acceptal	ble)	
				olider Address (F.C. Box Number is Not Acceptable)		
			83			
			84 City		85 Zip (Code
		y	'			
		2 and 607, 1908, Florida Stati, of Florida Such change was usins of Section 607,0505, F	of the stoom of the corporal authorized by the corporal forida Statutes.	poration submits this statement for the plion's board of directors. I hereby acce	purpose of changing it pt the appointment as	s registered registered
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFI	DETE /	OC IN 12
TITLE	D	DELETE	11 TITLE	ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	VAKNIN, YAACOV		12 NAME			
STREET ADDRESS	7670 INTERNATIONAL DRIVE	#100	13 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		1.4 City-ST-ZIP			1
TITLE		DELETE	2.1 TITLE		Change	Addition
NAME			2.2 NAME			Ì
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY+ST-ZIP	4		ľ
TITLE		DELETE	3.1 TITLE	11 11 11 11 11 11 11 11 11 11 11 11 11	Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		T pt.cre	4.4 CITY-ST-ZIP			
TITLE		DECETE	5.1 TITLE		Change	Addition
NAME DTOCKT 4DDDCCC			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP		Пон	Adam
NAME		בן אנניונ	6 1 TITLE		☐ Change	Addition
STREET ADDRESS			6.2 NAME			
l.			6.3 STREET ADDRESS			
14 I hereby co	ertify that the information supplied wi	th this films dose not quality	64 CITY-ST-ZIP	Section 119 07/3Vi) Florida Statutos I	A salt on a party salt as at a	

Indicated on this arministriprint or supplied with this limit boos not quarry for the exemption stated in Section 119.07(3)(), Florida Statutes. I further certify that the informatio indicated on this arministriprint 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.