FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT · CORPORATION ANNUAL REPORT 1996

SIGNATURE



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P93000059418	(2)
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MR. G CLOTHING CO., INC.

Mailing Address Principal Place of Business 145 E. FLAGLER 145 E FLAGLER SUITE C-7 MIAMI FL 33131 MIAMI FL 33131 3a. Date of Last Report 01/25/1995 3. Date Incorporated or Qualified 08/20/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0476972 26 21 \$8.75 Additional Suite, Apt. #. etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22

City & State 6. Flection Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 28 8. This corporation has liability for intangible tax under s. 199.032, Zφ Country Yes No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 GOLD, SALOMON Street Address (P.O. Box Number is Not Acceptable) 145 E. FLAGLER 83 SUITE C-7 **MIAMI FL 33131**

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 State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

84 City

(NOTE: Represent April a specime inspired wave remaining DATE Signature, typoid or pointed name of registered lagest and the charp stars. CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. Addition DELETE 1 1 TITLE TITLE GOLD, SALOMON 1.2 NAME NAME 145 E FLAGLER SUITE C7 1,3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33131** 1.4 C-1Y-ST-ZIP CITY-ST-ZIP DELETE [] Change Addition 2 1 TI*LE TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2.4 CU Y - ST - ZIP CITY - ST - ZIP ☐ Change ☐ Addition C DELETE 3 1 1111 8 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY-ST-ZP Change ncitibbA [DELETE 4.1 III.E THILE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - 7IF CITY-SI-ZIP Addition A DELETE 5 11-TLE TITLE 5.2 NAME NAME 5.3 STPEET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - 2IP CITY - ST - ZIP Change Add:tion DELETE 6 1 TITLE TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CiTY - ST - 7₁P CITY - ST - ZIP

appears in Block 12 or SIGNATURE:

14. I do hereby certify that the incertify that the information oath, that Lam an officer

> PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNAT

thing is voluntarily furnished and doos not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further for supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name achiment with an address

Applied For

Fee Required

Zip Code

85

Not Applicable