FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300063422 (8)

NEW CHELSEA CLOTHING CO.

SIGNATURE:

FILED Mar 04 1997 8:00am Secretary of State

Daytime Phone #



Principal France	OF BUSINESS	Mailing Address		- 1			,,,,,	
2275 N.E. 164TH North Miami E	H ST. BEACH FL 33160	2275 N.E. 164TH ST. NORTH MIAMI BEACH FL 3	3160-3703					
					3. Date Incorporated or Qualified 09/13/1993	3a. Date of Last Report 03/15/1996		
Principal Pa	ice of Business	2a, Mailing Address	440 -		4, FEI Number		Ar	oplied For
2016	NE ISSK Strank	26 2016 NE 1	SSIL Stra	4	65-0434442		No	ot Applicable
Suite Åpt #	f, etc	Suite, Apt #, etc.			5. Certificate of Status Desired			Additional equired
City & State City & State City & State D. Ming Beyeld, FL 28 P. Micon			Bidy FL		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
^{Zip} 33[6	Codutry 25	29 33162 3	Country Dula			Yes [] No	. 199.032,
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered A	igent	
	Laciin Brandy J Ne 167th Street		81 Name	9				
	82 Stree	82 Street Address (P.O. Box Number is Not Acceptable)						
NOR	TH MIAMI BEACH FL 33160		83					
				_				
			84 City			FL	85 Zip	Code
1 Pars and tr	the provisions of Sections 607.0502	and 607 1508. Florida Statutes	s the above-name	d cornor	ation submits this statement for the o	urnose of	changing if	ts registere
agent. Lan GNATURE .	X Brondy Pella	lions of Section 607.0505, Flor	ida Statutes.					
	OF HCERS AND		Registered Agent signatu	re required s	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND	DIRECTOR	25 IN 12
.i	Ď	DELETE	1.1 TITLE	Τ	ADDITIONS/OFFICE TO OFFICE	CIIO AIID	Change	Addition
Mí	POLLACK, BRANDY J		1.2 NAME				_ •	
RELET ADDRESS	2275 NE 164 STREET		1 3 STREET ADDRESS					
Y SI 7P	NORTH MIAMI BEACH FL		14 CHY-ST-ZIP					
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REET ADDRESS			5.3 STREET ADDRESS					
Y - 51 - 71P			5.4 CITY-ST-ZIP	<u> </u>	#*************************************			
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Mt			6.2 NAME					
REET ABORESS			6 3 STREET ADDRESS					
1Y SI 72			6.4 CITY - ST - ZIP		0	- 16 3	-17 0	
information Lam an of	y certify that the information supplied i me cated on this annual report or sc ficer or director of the corporation or t i Block 12 or Block 13 if changed, or	ipplemental annual report is tro he receiver or trustee empowe	ue and accurate an red to execute this	id that m	y signature shall have the same lega	il effect as	⊱lf made un	ider oath; t