FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED Jun 20, 2002 8:00 am Secretary of State 06-20-2002 90061 002 ***150.00

U	OCUME	NT#/
1.	Entity Name	

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

MIC APPAREL Corporation P94000001662



2. Principal Place of Business 8430 NW 68 Street 8430 NW 68 Street									
Suite, Apt. #, etc. Suite, Apt. #, etc			Q = 0170		DO NOT WRITE IN THIS SPACE				
Bay#4 Unit#4									
Miami, FL		Liny & State Hiami, FL		4. FEI Number 65-64	78236	Applied For Not Applicable			
<u>∵- ~33</u> }	to la Country		Zip Country		5. Certificate of Status Desired S8.75 Additional Fee Required				
		7. Name and Add	7. Name and Address of Current Registered Agent						
	DO NOT W	DITE	Name Brian S. Wilson						
DO NOT WRITE IN THIS SPACE			Street Address (P.C. Box Number is No. Acceptable)						
8. The above named entity submiss statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.									
SIGNATURE BILLIE President #0000 29/02									
	Signature, typed or printed name of registered agent an	d adie if applicable. INOTE: Regi	istered Agent signature requ	uned when remitoting)	DATE				
9. This corp	oration is eligible to satisfy its Intangible	January 1 - May 1							
łax filing	requirement and elects to do so.	After May 1, Fo	ee is \$550.00						
(Sec crite	eria on back)	Make Check Payable to			una Contribution.	Added to Fees			
11.	OFFICERS AND D	IRECTORS							
LIFE	Vice President		TITLE		· · · · · · · · · · · · · · · · · · ·				
NAME	Jennifer Nevot								
STREET ADDRESS	18430 NM 1881-#H		STREET ADDRESS						
CITY - ST - ZIP	Mami, FC 33166		CETY+S1-ZIP						
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STREET ADDRESS

CITY - ST- ZIP 19. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under roth; that I am an other or director of the corporation of the corporation of the receiver or ituative empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like emprovered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Attachment DOCUMENT # PAH000001662

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

June 3, 2002

MIAMI INTERNATIONAL CLOTHING CORPORATION 8430 NW 68 ST BAY #4 MIAMI, FL 33166

Subject: MIAMI INTERNATIONAL CLOTHING CORPORATION

Reference Number:

P94000001662

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please note the money amounts differ on the check. The numeric and written amounts must be the same. Please send a corrected check for the proper amount.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/JN ANNUAL REPORTS SECTION