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

CORPORATION ANNUAL REPORT

CITY-SI-78



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P94000023298 (0)

Mailing Address   1830 Ke 314 NVE   1830 Ke 314 NVE   FT LAUDERDALE FL 33005-\$906	CLERO	gy apparel Christian Boo	OK STORE, INC.								
### Applied Ft    Applied Ft   Applied Ft   Applied Ft   Applied Ft   Applied Ft	Principal Pla	ace of Business			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	I MANITANI IIM 10111 01011 01	IN BUNINGS		)	1817 (88)	
Company   Comp			33305-3908								
Suite, Apt #, etc.  Suite Address of Statutes #, etc.  Suite Apt #,								Qualified			eport
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   S. Certificate of Status Desired   \$8.75 Addition. Fee Required   City & State   City & State   S. Election Campaign Financing Trust Fund Contribution   Added to Fees	2. Principal	Place of Business	2a. Mailing Address				1,, , ,		·· <b>····</b> ······························	Ap	plied For
City & State	1		26				59-1712301			No	t Applicable
Trust Fund Contribution		it #, etc.					5. Certificate of Status D	esired			
Page 125   29   30   Florida Statutes   27 yes   No   9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent		ate					, -				
MARCELLINO, MICHAEL J JR 1933 NE 4TH AVE FT LAUDERDALE FL 33305  84 City FL 85 Zip Code  11. Pursuant to the provisions of Socilions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registre office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent, than ternillar with, and accept the obligations of, Section 607.0505, Florida Statutes  SIGNATURE Signature, typed or printed name of registered agent and intell applicable (NOTE Registered Agent agreemed when remarkables)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE D STATE TO STATE THE Change Admits a Statute Statu	—	25 29			ntry	Florida Statutes Yes No					
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 register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes  SIGNATURE    Signature: typed or printed name of registered agent and ideal if applicable   (NOTE Registered Agent signature required when reinstating)   DATE		<ol><li>Name and Address of Current</li></ol>	Registered Agent				10. Name and Address of	I New Re	gistered /	Agent	
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 register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  Signature: Signat	1933 NE 4TH AVE				B2	82 Street Address (P.O. Box Number is Not Acceptable)					
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, Speed or printed name of registered agent and ideal if applicable (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 III TITLE  DELETE 1.1 TITLE  Change Add  AMARCELLINO, MICHAEL J JR  1.2 NAME  1.3 STREET ADDRESS  CITY-S1-7IP  PLANTATION FL  DELETE 2.1 TITLE  Change Add  NAME  MARCELLINO, MICHAEL J SR  DELETE 2.1 TITLE  Change Add  Change Add  NAME  MARCELLINO, MICHAEL J SR					84	City		<del></del>	FL	<b>85</b> Zip (	Code
Signature. Speed or printed name of registered agent and ide if applicable (NOTE Registered Agent aignature required when reinstating) DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THLE  DELETE  1.1 TITLE  NAME  STREET ADDRESS  9923 NW 6TH CT.  1.3 STREET ADDRESS  CITY-S1-ZIP  PLANTATION FL  DELETE  2.1 TITLE  D  Change Ad  AMARCELLINO, MICHAEL J SR  AMARCELLINO, MICHAEL J SR  DELETE  2.1 TITLE  D  Change Ad  AMARCELLINO, MICHAEL J SR	11. Pursuar office o agent. I	nt to the provisions of Sections 607,0502 r registered agent, or both, in the State i am familiar with, and accept the obliga	and 607.1508, Florida Statut of Florida, Such change was tions of, Section 607.0505, Fl	tes, the ab authorized orida Stati	pove by utes	named corpora	poration submits this statemention's board of directors. I her	of for the paby accep	ourpose of of the app	changing its ointment as	s registered registered
12.         OFFICERS AND DIRECTORS         13.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12           THLE         D         DELETE         1.1 TITLE         Change         Ad           NAME         MARCELLINO, MICHAEL J JR         12 NAME         STREET ADDRESS         9923 NW 6TH CT.         1.3 STREET ADDRESS           CITY - STI - ZIP         PLANTATION FL         1.4 CITY - STI - ZIP         Change         Ad           NAME         MARCELLINO, MICHAEL J SR         22 NAME         AME	SIGNATURE	Signature typed or printed name of registered agen	t and trie if apolicable (NOT	TE Registered	I Age	nt signature requi	red when reinstating)	······································	DATE		
DELETE	12.				Au			TO OFFIC		DIRECTOR	S IN 12
NAME   MARCELLINO, MICHAEL J JR   12 NAME     13 STREET ADDRESS     13 STREET ADDRESS     14 CITY-ST-ZIP					LE.						Addition
STREET ADDRESS   9923 NW 6TH CT.   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP	NAME	MARCELLINO, MICHAEL J JR		1.2 NA	ME	[					
CITY-S1-ZIP         PLANTATION FL         1.4 CITY-S1-ZIP           THEE         D         DELETE         2.1 TITLE         Change         Ad           NAME         MARCELLINO, MICHAEL J SR         22 NAME         Change         Ad		_ · · · · · · · · · · · · · · · · · · ·			_	ADDRESS					
THE D DELETE 2.1 TITLE Change Ad	•										
NAME MARCELLINO, MICHAEL J SR 22 NAME		CANADA AND AND AND AND AND AND AND AND AN					Marine, ************************************	<del></del>	<del></del>	Change	Addition
		1 =								_,	
STREET ADDRESS   6801 NVV 3811 C1 2.3 STREET ADDRESS	STREET ADORES	AAAA BIIII BAYIII AY			_	ADDAFSS					

TAMARAC FL 33321 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Till F 3.1 TITLE Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-ST-7/P 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-S1-ZIP DELETE 51 TITLE Change Addition THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS C-TY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE THILE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report 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.

chief J. MANIELLING, JA. 4/9/97

**FILED** 

Apr 15 1997 8:00am

Secretary of State