FILED FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 Aug 07 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # P 9 4 00 0 0 3 6 8 5 8 (8) APP Fashions Ire. Principal Place of Business Mailing Address 540 NW 2819 St MIAMI P. 33127 3a. Date of Last Report 2. Principal Place of Business 2a. Mailing Address Applied For Same Same Not Applicable Suite. Apt. #, etc Suite, Apt. #, etc \$8.75 Additional Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Źip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes D No 30 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Lemus, Loida 6431 SW 106 Auc. Street Address (P.O. Box Number is Not Acceptable) 83 MIA, F1. 33173 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent are title if approable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition DIAZ-Meneses, Maricel 3817 SW 82nd. Auc TITLE VS 1.1 TITLE NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS MIAMI F/. 33155 CITY-ST-ZIP 1 4 CITY - ST-ZIP Meneses, Edward 6431 SW 106 Aug TITLE VD DELETE 2 1 THUE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS MIAMI F1 33173 CITY-ST-7/P 2 4 CITY - ST - 7IP DELETE 3 1 TITLE TITLE V7 Meneses, AIFRED 3817 SW 82nd Aug Change Addition NAME 3.2 NAM5 STREET ADDRESS 3 3 STREET ADDRESS MIAM, F1.33155 CITY - ST - ZIP 3.4 CITY-ST-ZIP Menesos ABILIO 6431 Sw 106 Ave MIAMI M. 1. 33173 DELETE Change Addition TITLE A 1 TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4.4 CiTY-ST-ZIP Meneses, Lydia 6431 SW 106 Auc DELETE Change Addition TRE ST 5.1 TIME NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS MIAUI FIL 33173 CITY - \$1 - ZIP 5 4 CITY - ST - ZIP DELETE Change Addition TITLE 6 1 TITLE 900002612**4**99 NAME

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

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

STREET ADDRESS.

NO TYPED OR PRINTED NAME OF

305-576-0730

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