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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000031700

INTERNA	ATIONAL GARMENT CORPO	ORATION							
Principal Place	e of Business	Mailing Address					L 1831/1880 ) (U LALI) DIBII OBII( 831/7 80/1) OI	### C11#1 1#11 1#W	49       90      90
1240 W 13TH ST P.O. BOX 10872 RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33419 US US							DO NOT WRITE IN TH	IIS SPACE	
			•				3. Date Incorporated or Qualifed 04/21/1994		
2. Principal P	lace of Business	2a. Mailing Address	ı				4. FEI Number 65-0487174	<b>⊢</b>	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certifcate of Status Desired	Fee R	Additional Required
City & Stat	e	City & State -			-	- '	6. Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Zip 24	Country 25	Zip 29	Cou 30	ntry			<ol><li>This corporation owes the current year Personal Property Tax.</li></ol>	Intangible Yes	□No
	9. Name and Address of Curre	nt Registered Agent					10. Name and Address of New Register	ed Agent	
501	IOLAGO E PUNIDV	· · · · · · · · · · · · · · · · · · ·		81	Name		<del></del>		
DOUGLASS E. RHUDY 1240 W. 13TH ST.				82	Street A	Addres	ddress (P.O. Box Number is Not Acceptable)		
RIVIERA BEACH FL 33404				83					
				84	City			85 Zip	Code
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was at	uthorized	l bv i	the carpo	corpor	ation submits this statement for the purpose 's board of directors. I hereby accept the ap	of changing it pointment as r	s registered registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	Registered	Ageni	it signature re	quired v	when reinstating) DATE		
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	☐ DELETE	1.1 TI	LE				Change	Addition
NAME	RHUDY, DOUGLASS E.		1.2 NA	ME			· · · · · · · · · · · · · · · · · · ·	•	
STREET ADDRESS	149 EAGLETON COURT		1.3 ST	REET	ADDRESS	81	30 Woodsmuir Dr. Dest Palm Beach, FL	22./12	<b>\</b>
CITY+ST-ZIP	PALM BEACH GARDENS FL		1.4 CI		T-ZIP	и	lest Palm Beach, LL	<u> </u>	- Daddies
TITLE	VP	☐ DELETE	2.1 TIT					☐ Change	Addition
NAME	HUTTON, JOSEPH M. JR.		2.2 NA						1
STREET ADDRESS	101 COCO LANE JUPITER FL				ADDRESS		•		
CITY-ST-ZIP	JUPHEN PL	☐ DELETE	2. 4 CI		T-ZIP			_ [_] Change	Addition
TITLE NAME		LI UECETE	3.1 TI7				•	, ogo	
STREET ADDRESS			,		ADDRESS		·		
CITY-ST-ZIP			3.4. CI						
TITLE		☐ DELETE	4.1 TT	TLE .				Change	B ☐ Addition
NAME			4. 2 N/	AME			•		
STREET ADDRESS	•		4.3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 CF	TY-ST	T- ZIP				
TITLE	,	☐ DELETE	5.1 TIT					☐ Change	e ☐ Addition
NAME			5.2 NA						}
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		☐ DELETE	5.4 CF 6.1 TF		I-ZIP		- All -	☐ Change	e
TITLE		□ nere ie	6.2 NA						
NAME					ADDRESS !				
STREET ADDRESS	İ		0.00						J

14. I 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 justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter or a state things of the corporation of the corpora

6.4 CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP

E REQUIRED

Daytime Phone #