FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 24 PM 12:51

DOCUMENT # **P94000037070 (7)**

1. Corporation Name
NIKO'S SPORTSWEAR INCORPORATED

Principal Place of Business	Mailing Address
3528 N.W. 10TH AVENUE OAKLAND PARK FL 33309	3528 N.W. 10TH AVENUE OAKLAND PARK FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/12/1994
3a. Date of Last Report:

2. Principal Place of Business
21: 3532 NW 10TH AVE
22: Suite, Apt. #, etc.
23: OAKLAND PARK FL
24: Zip 33309 25: County DADE

2a. Mailing Address
26: 4729 SW 135CT
27: Suite, Apt. #, etc.
28: MIA FL
29: Zip 33175 30: County DADE

4. FEI Number: APPLIED FOR. ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. This corporation has liability for investigative interest. F.S. 199.032. Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

VALENCIA, FABIAN
627 ANDERSEN CIRCLE, #309
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name: ALVEIRO VALENCIA
82 Street Address (P.O. Box Number is Not Acceptable): 4729 SW 135CT
83:
84 City: MIAMI FL 85 Zip Code: 33175

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 607.0509, Florida Statutes.

SIGNATURE: ALVEIRO VALENCIA — 5-15-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	11 TITLE	☐ Change ☐ Addition
NAME	VALENCIA, FABIAN	12 NAME	
STREET ADDRESS	627 ANDERSEN CIRCLE, #309	13 STREET ADDRESS	
CITY ST ZIP	DEERFIELD BEACH FL 33441	14 CITY ST ZIP	
TITLE	PD	21 TITLE	☐ Change ☐ Addition
NAME	ORTEGA, ADELBERT	22 NAME	
STREET ADDRESS	627 ANDERSEN CIRCLE, #309	23 STREET ADDRESS	
CITY ST ZIP	DEERFIELD BEACH FL 33441	24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] 5-15-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0216001 CP