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

APPROVED AND FILED

95 JAN 31 AM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000040307 (8)

1. Corporation Name
FIVE Y CLOTHING, INC.

Principal Place of Business
YORAM IZHAK % SILVER & GARVETT PA
3350 SW 27TH AVE ONE GROVE VILLA
COCONUT GROVE FL 33133

Mailing Address
YORAM IZHAK % SILVER & GARVETT PA
3350 SW 27TH AVE ONE GROVE VILLA
COCONUT GROVE FL 33133

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/25/1994
3a. Date of Last Report:

2. Principal Place of Business
21 711 WEST 16TH STREET
Suite, Apt. #, etc. 22
City & State 23 HIALEAH, FL. 33010
Zip 24 Country 25

2a. Mailing Address
26 711 WEST 16TH STREET
Suite, Apt. #, etc. 27
City & State 28 HIALEAH, FL. 33010
Zip 29 Country 30

4. FEI Number: 65-0502298 ☐ 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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SILVER, SCOTT A ESQ
SILVER & GARVETT PA
3350 SW 27TH AVE ONE GROVE VILLA
COCONUT GROVE FL 33133

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP IZHAK, YORAM % 3350 SW 27TH AVE ONE GROVE VILLA COCONUT GROVE FL 33133	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	600001345915 ☐ Change ☐ Addition -02/01/95--01052--013 ****200.00 ****200.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D.V.P. MORDEHAY TAKO 711 WEST 16TH STREET HIALEAH, FL. 33010 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	D. SECTY TREAS RONEN ELIMELECH 711 WEST 16TH STREET HIALEAH, FL. 33010 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T.S. 1/31/95	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	D.V.P. REUVEN TAKO 711 WEST 16TH STREET HIALEAH, FL. 33010 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

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: _____ 01-20-1995 305-887-1936
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
YORAM IZHAK PRES.

0427030 FP