FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CCRPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P94000048246 (0) DOCUMENT #

FERNANDO GARCIA ALTA Y BAJA COSTURA, INC. Principal Place of Business Mailing Address 1370 WASHINGTON AVE. 307 1370 WASHINGTON AVE. 307 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 3a. Date of Last Report 06/23/1994 05/01/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0510122 21 26 Not Applicable Suite, Apr. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Z_{10} Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GARCIA, FERNANDO 82 Street Address (P.O. Box Number is Not Acceptable) 1370 WASHINGTON AVE, 307 83 MIAMI BEACH FL 33139 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE D ☐ Change ☐ Addition TITLE 1 1 TITLE GARCIA, FERNANDO NAME 1.2 NAME 1370 WASHINGTON AVE, 307 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY - ST-ZIP 1.4 DITY-ST-7(P TiTt€ DELETE 2 1 THTLE ☐ Change Addition SANCHEZ, LUIS F NAME 2.2 NAME 1370 WASHINGTON AVE. 307 STREET ADDRESS 2 3 STREET ADDRESS MIAMI BEACH FL 33139 CITY - ST - ZIP 24 CITY-ST-ZIP DELETE Change TITLE 3 1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHTY-ST-ZIP 3 4 CiTY-ST-ZIP TRILE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP ☐ DELETE TETLE 5 1 TITLE Change Addition NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP THILE DELETE 6. 1 TITLE Change Addition NAME 6.2 NAME STHEET ADDRESS **6.3 STREET ADDRESS**

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)(k). Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the visibilities; and that my name certify that the information indicated on this annual report or oath, that I am an officer or director of the corporation or the appears in Block 12 or Block II is if changed, or on an attack with an address

6 4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

GNING OFFICER OR DIRECTOR

FERNANDO GARCIA 2/15/96 305 532-1413

(12/95)CR2E034