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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P94000048539 (8)

CUSTOM SHIRT CONNECTIONS, INC.

Principal Place :	of Business	Mailing Address					
	AY HARBOR DRIVE	9720 WEST BAY HAR	9720 WEST BAY HARBOR DRIVE BAY HARBOR FL 33154				
					 Date Incorporated or Qualified 06/27/1994 	3a. Date of Last Report 03/07/1995	
2. Principal Place of Business		2a. Mailing Address 26 807 N. Nor	"1 d = "		4. FEI Number Applied For 65-0498656 Not Applica		
Suite, Apt. #	, etc.	Suite, Apt #, etc. 27 # 0 / / w ee	d, F1	33019	5. Certificate of Status Desired	\$8.75 Add	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Ma Added to F	
Ζφ 24]	Country 25	Zip 29	Gountry 30		8. This corporation has liability for Florida Statutes	intangible tax under s 199.t	032,
	9. Name and Address of Co	urrent Registered Agent	81	Name	10. Name and Address of New	Registered Agent	
CATOO	LINDA						
SAFRO, 1515 NO	linda). University drive ste.	103	82	Street Addr	ress (P.O. Box Number is Not Accepta	ble)	
	SPRINGS FL 33071	100	83				
			84	City		FI 85 Zip Cod	le
or registere familiär with SIGNATURE	d agent, or both, in the State of	Horida. Such change was authorize Section 607.0505, Florida Statutes	ed by the corp	oration's boar	ration submits this statement for the pr rd of directors. I hereby accept the app	rpose of changing its registe cointment as registered agen	red office it. I am
12.		S AND DIRECTORS	13.	Tograde Propose	ADDITIONS/CHANGES TO OF		√ 12
TITLE	D	∑ DELETE	1. 1 TITLE			☐ Change ☐	Addition
NAME STREET ADDRESS C4Y+S1+7/P	BORNSTEIN, DAWN -9720 West Bay Harbo Bay-Harbor Fl-33154		1.2 NAME 1.3 STREET 1.4 CITY - 3	ľ			
		ET NELETC	2 1 TIFLE 22 NAME			☐ Change ☐	Addition
NAME	BORNSTEIN, DA 807 N. NORTH	lww.					
STREET VOLUMESS				ADDRESS			
CITY STAZIFI. TITLE	Hollywood, Fl.	DELETE	2.4 CHTV-ST-ZIP 3.1 TITLE			Change	Addition
NAME.			3.2 NAME			ال موسورين ال	redition
SPEELL ADDRESS			33 STREE	T ADDRESS			
CHIY ST ZVP		FT) printe	3.4 CITY - :	ST-ZIP			
HPLF NAME		DELETE	4 1 TITLE 4 2 NAME			☐ Change ☐	Addition
STREET ADDRESS				ADDRESS			•
CiTY+St-ZiP			4.4 CITY - :	ST ZIP			
TITLE		☐ DELETE	5 1 TITLE			Change	Addition
NAME CHARLET ARRIVERS			5.2 NAME	t aboncec			
STREET ADDRESS CITY ST ZIP				ADDRESS			
111.f		☐ DELFTE	5 4 CITY- \$T-ZIP 6 1 TITLE			Change	Addition
NAME			6 2 NAME			_	
STREET ADDRESS			6.3 STREE	ADDRESS			
City-St-2if	contile that the before store as	allocal with this files is valuated. for	64 CITY-		for the exemption stated in Section 11	A OZIOVILI Electedo Carlo de Carlo	6 setto o :
 certify that oatn; that I 	the information indicated on this am an off-cer or director of the i	s annual report or supplemental ann	ual report is tr e empowered	ue and accura	ate and that my signature shall have the is report as required by Chapter 607, I	e same legal effect as if mad	e under

SIGNATURE

CHATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-96 954-911-2998
Dayone Phone #

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32E034 (12/95