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 MAR 31 PM 3:40

DOCUMENT # **P94000057949 (7)**

1. Corporation Name
NAUTICA OF VERO BEACH, INC.

Principal Place of Business
C/O THE PRENTICE HALL CORPORATION SYSTEM
1201 HAYS ST.. SUITE 105
TALLAHASSEE FL 32301

Mailing Address
C/O THE PRENTICE HALL CORPORATION SYSTEM
1201 HAYS ST.. SUITE 105
TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/04/1994
3a. Date of Last Report:

2. Principal Place of Business
21
Suite, Apt #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 40 WEST 57TH STREET
Suite, Apt. #, etc
27 3RD FLOOR
City & State
28 NEW YORK NY
Zip 29 10019 Country 30 USA

4. FEI Number: 65-0527862 — 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
THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

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: (Signature (and/or printed name) of registered agent and the date below) NOTE: Registered Agent signature required when registering. DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	JOHN WETZLER
STREET ADDRESS	40 WEST 57TH STREET
CITY ST ZIP	NEW YORK NY 10019
TITLE	VD
NAME	HARVEY SANDERS
STREET ADDRESS	40 WEST 57TH STREET
CITY ST ZIP	NEW YORK NY 10019
TITLE	VD
NAME	DAVID CHU
STREET ADDRESS	40 WEST 57TH ST
CITY ST ZIP	NEW YORK NY 10019
TITLE	TS
NAME	SHARON BUND
STREET ADDRESS	40 WEST 57TH ST
CITY ST ZIP	NEW YORK NY 10019
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☐ Change ☑ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY ST ZIP		
21 TITLE		☐ Change ☑ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY ST ZIP		
31 TITLE		☐ Change ☑ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY ST ZIP		
41 TITLE		☐ Change ☑ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
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 exemptions stated in Section 119.07(3)(k), 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 alteration.

SIGNATURE: [signature] 3/23/95 Date — 212 841 7180 (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

0006780 CP