

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000061323 (9)

1. Corporation Name

DJ'S PLUS SIZES, INC.



Principal Place of Business

4931 S. ORANGE AVE.
ORLANDO FL 32806

Mailing Address

4931 S. ORANGE AVE.
ORLANDO FL 32806

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MIDSTATE LEGAL SUPPLY CORP.
4435 OLD WINTER GARDEN RD.
ORLANDO FL 32811

3. Date Incorporated or Qualified

08/19/1994

3a. Date of Last Report

06/22/1995

4. FEI Number

59-3263618

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

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 of person authorized to sign this report

Signature of person authorized to sign this report

Date

12. OFFICERS AND DIRECTORS

11 TITLE ☐ DELETE

NAME
D POWERS, DEBBIE A
4931 S. ORANGE AVE.
ORLANDO FL 32806

12 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

13 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

14 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

15 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

16 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

17 TITLE ☐ DELETE

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

15 TITLE ☐ Change ☐ Addition

16 NAME

17 STREET ADDRESS

18 CITY, ST, ZIP

19 TITLE ☐ Change ☐ Addition

20 NAME

21 STREET ADDRESS

22 CITY, ST, ZIP

23 TITLE ☐ Change ☐ Addition

24 NAME

25 STREET ADDRESS

26 CITY, ST, ZIP

27 TITLE ☐ Change ☐ Addition

28 NAME

29 STREET ADDRESS

30 CITY, ST, ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

35 TITLE ☐ Change ☐ Addition

36 NAME

37 STREET ADDRESS

38 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)(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 or person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if I am listed, or in an addition block if an addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/96 (407) 438-2183

CR2E034 (12/95)