

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000094082 (2)

1. Corporation Name

D & D SPORTSWEAR, INC.

Principal Place of Business

Mailing Address

6335 GRAND CYPRESS CIRCLE  
829 CAMINO ROAD. BLDG. 11-A. APT. 205  
LAKE WORTH FL 33463  
US

6335 GRAND CYPRESS CIRCLE  
829 CAMINO ROAD. BLDG. 11-A. APT. 205  
LAKE WORTH FL 33463  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/28/1994

4. FEI Number

65-0540043

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 owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☒ No n/a

2. Principal Place of Business  
21 6335 GRAND CYPRESS CIR.  
Suite, Apt. #, etc.

2a. Mailing Address  
26 6335 GRAND CYPRESS CIR.  
Suite, Apt. #, etc.

22 City & State  
23 LAKE WORTH FL.

27 City & State  
28 LAKE WORTH FL.

24 Zip  
33463  
25 Country  
PALM BEACH

29 Zip  
33463  
30 Country  
PALM BEACH

9. Name and Address of Current Registered Agent

DEUTCHMAN, ROBERTA  
6335 GRAND CYPRESS CIRCLE  
BLDG. 11-A, APT. 205  
LAKE WORTH FL 33463

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	DEUTCHMAN, ROBERTA	
STREET ADDRESS	6335 GRAND CYPRESS CIRCLE	
CITY-ST-ZIP	LAKE WORTH FL 33463	

TITLE	D	<input type="checkbox"/> DELETE
NAME	DERMER, GLORIA	
STREET ADDRESS	2723 GREEN APPLE LANE	
CITY-ST-ZIP	ROCKFORD IL 61107	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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

Roberta Deutchman

3/2/98 (61) 963-99/9

CR2E034 (10/97)