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

DOCU 1. Corporatio	n Name				0238	305 (1)									
SHOES, SHIRTS, & SHORTS, INC.												1 11#/FEB. 118 13181 #111 #6/F1 #) 	
Principal Place of Business Mailing Address														1811 HALL III		
108 GULL CT. CASSELBERRY FL 32707					108 GULL CT. CASSELBERRY FL 32707											
					•							3. Date Incorporated or Qualified 03/22/1995	За.	Date of Last	t Report	İ
2. Principal Pi 21 4270	Alomo			h	2a. Mailing Address							4. FEI Number Applied Fo			ed For	
Suite, Apt.		Suite, Apt. #, etc.							59-3306350 Not Applic							
22 ## /				27	27							5. Certificate of Status Desired			75 Add	
City & State		City & State							6. Election Campaign Financing			e Requ				
23 Winter Park, FL				28	28							Trust Fund Contribution			. 00 м.	
Zip 24 32790	32792 25 USA				29 30			_	Country			Added to Fees This corporation has liability for intangible tax under s 199.032, Florida Statutes				
Name and Address of Current Registered Agent												10. Name and Address of New	legiste	red Agent		
1/4555								8	1	Name						
KABREY, DOUGLAS L 108 GULL CT. CASSELBERRY FL 32707								8	2	Street Ad	Address (P.O. Box Number is Not Acceptable)			 		
								8	_							
UNOSE	LDENN) F	L 32	101					l°	3							
								8		City					Zip Cod	
 Pursuant t or register 	to the provisioned agent, or l	ons o both,	f Sections 607.05 in the State of Fi	502 and 6 lorida. Su	307.1508, F ch change	lorida Statut was authoriz	tes, th	e above	-na	med corporation's ho	oratio	on submits this statement for the purifications. I berefix accept the part			s registe	ered office
familiar wit SIGNATURE	th, and accep	ot the	obligations of, Se	ection 601	7.0505, Flo	rida Statutes	S.	,,	P C.	a. 511 6 50	<i>,</i> , , , , , , , , , , , , , , , , , ,	on submits this statement for the purification of directors. I hereby accept the app	OHUHBI	iii as register	eo agei	it. ram
	Signature, typieci c	or printe	ed name of registered ag	gent and title	i applicable.	(NC	OTE: Re	gistered Ag	ent s	sgnature requi	ired wh	on reinstating)	DA]E		
12.	OFFICERS A			AND DIRE	AND DIRECTORS			13.				ADDITIONS/CHANGES TO OFF			TORS IN	V 12
TITLE						DELETE		1. 1 TITL				sident		☐ Chang	e 🔯	Addition
NAME							_ [1.2 NAM6				iglas L. Kabrey				
STREET ADDRESS							ı	1.3 STRE	ET AE			Gull Ct.				
CITY-ST-ZIP TITLE						DELETE		1.4 CITY		ZIP C	<u>as</u>	selberry, FL 32;	707			
NAME					LJ	DELETE		2 1 7171.6		V	/.P.	·		☐ Change	e 🔀	Addition
	STREET ADDRESS				ľ			1			LOL S. KABREY					
CHY-SI-ZIP												18 GULL Ct.				
TITLE					DELFIE			3 1 7/1/2			AS.	SELBERRY, FL 3:	707	Change		Addition
NAME								3.2 NAME				·		[_] Change	لہا'	Addition
STREET ADDRESS							ľ	3.3 STRE		OORESS						
CITY-ST-ZIP								34 CITY -								
TITLE						DELETE		4 1 THILE						☐ Change		Addition
NAME								4.2 NAME		+						
STREET ADDRESS								4.3 STREE	f AD	DRESS						
CITY - ST - ZIP	· · · · · · · ·							4.4 CITY -	ST-Z	ZIP						
TITLE						DELETE		5. 1 TITLE						Change		Addition
NAME STREET ADDRESS								5.2 NAME								
							- 1	5 3 STREE		- 1						
CITY-ST-ZIP TITLE						DELETE		54 CITY-	ST - Z	ZIP				F-1		
NAME					ப	DELLIC		6. 1 TITLE		1				Change		Addition
STREET ADDRESS								6.2 NAME 6.3 STREE	T AP	DDC CC						i
CITY-S1-ZIF								64 CITY -		1						
								2 / 2017 /	-, 4							

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 cath; 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 atlachment with an address. SIGNATURE:

Carol S. Kalsey CAROL S. KABREY
SIGNATURE AND TYPED OR PRINTED NAW OF SIGNING OFFICER OR DIRECTOR 4-22-96 407-671-3666 Date Dayling Phone #