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P95000042622 (7)

PROFIT CORPORATION ANNUAL REPORT

1998

PREMIER SPORTSWEAR CORP.

DOCUMENT #
1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 24 1998 8:00am Secretary of State

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			······································	
Principal Place of Business Mailing Address		A 80		
6250 PALM TRACE LANDING DR STE 313		6250 PALM TRACE LANDIN STE 313	G DR	
DAVIE FL 333	314	DAVIE FL 33314		DO NOT WRITE IN THIS SPACE
US		U\$		3. Date Incorporated or Qualified
6 Drive air at D	Name of Disciplant	De Mailing Address		05/22/1995 4. FEI Number Applied For
· ·	lace of Business	2a. Mailing Address		4. FEI Number Applied For 65-0588870 Not Applicable
Suite, Apt.	# etc	26		SR.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XYes No
24	25 25 25 25 25 25 25 25 25 25 25 25 25 2	29 30 ent Registered Agent	01	Personal Property Tax due June 30. Yes L No 10. Name and Address of New Registered Agent
GUACCI, FRANCO 81 Name				
COEO DALLA TRACE LANDINGE DO 4212			82 Street	Address (P.O. Box Number is Not Acceptable)
	WE FL 33314	, , , , , ,	62 Street	Address (1.0. Box Number is Not Acceptable)
			83	
			84 City	Fi 85 Zip Code
11. Pursuant to the provisions of Sections 807.0502 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				
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 registimed agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AF	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	GUACCI, FRANK		1.2 NAME	Guaca Frank
STREET ADORESS	3300 N.E. 192ND STREET		1.3 STREET ADDRESS	6250 PACM TRAVE LAND MES DL # 313
CITY-ST-ZIP	AVENTURA FL 33180		1.4 CITY - ST - ZIP	DAVIE - FL. 33314
TITLE		DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY - ST - ZIP		T belete	2. 4 CITY - ST - ZIP	Observe Addition
TITLE		☐ D€LFTE	3.1 TITLE	Change L Addition
NAME SYDEET ADDRESS			3.2 NAME 3.3 STREET ADDRESS	
STREET ADORESS CITY-S1-ZIP			3.3 STREET ADDRESS	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		[] DELETE	5.4 CITY - ST - ZIP	Change Addition
TITLE		DECEIE	6.1 TITLE	Change Addition

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:

STREET ADDRESS CITY-ST-ZIP