

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000043195 (3)

1. Corporation Name

ACCESSORIES, ETC. INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

4776 SW 72ND AVE  
MIAMI FL

4776 SW 72ND AVE  
MIAMI FL

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/06/1995

3a. Date of Last Report

4. FEI Number

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

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

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 PD  
NAME SOBEL, LIZ  
STREET ADDRESS %4776 SW 72ND AVE  
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE V  
NAME SOBEL, TED  
STREET ADDRESS %4776 SW 72ND AVE  
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE VD  
NAME SOBEL, CLAIR  
STREET ADDRESS %4776 SW 72ND AVE  
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE ST  
NAME SOBEL, PETER N  
STREET ADDRESS %4776 SW 72ND AVE  
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE V.P.D. ☒ Change ☐ Addition  
2.2 NAME PETER SOBEL  
2.3 STREET ADDRESS 90 4776 SW 72ND AVE  
2.4 CITY-ST-ZIP MIAMI, FL 33155

3.1 TITLE V ☒ Change ☐ Addition  
3.2 NAME TED SOBEL  
3.3 STREET ADDRESS 90 4776 SW 72ND AVE  
3.4 CITY-ST-ZIP MIAMI, FL 33155

4.1 TITLE ST ☒ Change ☐ Addition  
4.2 NAME Claire Sobel  
4.3 STREET ADDRESS 4776 SW 72ND AVE  
4.4 CITY-ST-ZIP MIAMI, FL 33155

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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:

Lizbeth Sobel / Lizbeth Sobel 4/22/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(305) 667-3711

Daytime Phone #

CR2E034 (12/95)