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Feb 09 1998 8:00am

Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000044184 (6)

1. Corporation Name

HELIOS CLOTHING, INC.



Principal Place of Business

Mailing Address

915 CENTRAL AVENUE  
ST. PETERSBURG FL 33713

915 CENTRAL AVENUE  
ST. PETERSBURG FL 33713

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 909 CENTRAL AVE

Suite, Apt. #, etc.

22

City & State  
23 St. Petersburg, FL

Zip

24 33705

Country

25 US

2a. Mailing Address

26 14 BAUM AVENUE

Suite, Apt. #, etc.

27

City & State  
28 St. Petersburg, FL

Zip

29 33705

Country

30 US

3. Date Incorporated or Qualified

06/07/1995

4. FEI Number

59-3326911

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

9. Name and Address of Current Registered Agent

JOHNS, LORI  
C/O HELIOS CLOTHING, INC.  
915 CENTRAL AVENUE  
ST. PETERSBURG FL 33713

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

Lori Johns

(NOTE: Registered Agent signature required when reinstating)

DATE

1-27-98

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

D  
JOHNS, LORI  
915 CENTRAL AVENUE  
ST. PETERSBURG FL 33713

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

D  
JOHNS, BRIAN  
915 CENTRAL AVENUE  
ST. PETERSBURG FL 33713

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

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TITLE NAME STREET ADDRESS CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

914 BAUM AVE  
ST PETERSBURG, FL 33705

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP

14 BAUM AVE  
ST PETERSBURG, FL 33705

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

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

6.1 TITLE 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.

CR2E034 (10/97)