

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

FILED
Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000052384 (1)

Corporation Name
JO ISLAND WEAR, INC.



Principal Place of Business

507 54TH STREET

33012

Mailing Address

4000 WEST 54TH STREET

SUITE 404

HALEAH FL 33012-2158

3. Date Incorporated or Qualified

07/06/1995

3a. Date of Last Report

03/11/1996

4. FEI Number

65-0595808

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

Principal Place of Business

8770 NW 142 ST

Suite, Apt. #, etc.

2a. Mailing Address

8770 NW 142 ST

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33018

Country

Zip

33018

Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301-2525

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

OFFICERS AND DIRECTORS

☐ DELETE

12.1 TITLE

P

CARBALLEA, JUAN

12.2 STREET ADDRESS

4000 WEST 54TH STREET, SUITE 404

12.3 CITY-ST-ZIP

HALEAH FL 33012

12.4 TITLE

☐ DELETE

12.5 STREET ADDRESS

12.6 CITY-ST-ZIP

12.7 TITLE

☐ DELETE

12.8 STREET ADDRESS

12.9 CITY-ST-ZIP

12.10 TITLE

☐ DELETE

12.11 STREET ADDRESS

12.12 CITY-ST-ZIP

12.13 TITLE

☐ DELETE

12.14 STREET ADDRESS

12.15 CITY-ST-ZIP

12.16 TITLE

☐ DELETE

12.17 STREET ADDRESS

12.18 CITY-ST-ZIP

12.19 TITLE

☐ DELETE

12.20 STREET ADDRESS

12.21 CITY-ST-ZIP

12.22 TITLE

☐ DELETE

12.23 STREET ADDRESS

12.24 CITY-ST-ZIP

12.25 TITLE

☐ DELETE

12.26 STREET ADDRESS

12.27 CITY-ST-ZIP

12.28 TITLE

☐ DELETE

12.29 STREET ADDRESS

12.30 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

8770 NW. 142 ST.
MIAMI, FL 33018

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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

SIGNATURE

SIGNATURE

CR2E034 (9/96)