FILED

Feb 21, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000060019

Corporation Name

SOUTHEAST CLOTHING COMPANY

SOUTHER	191 OFO LUIMO COMESMA						
Principal Place	of Business	Ma	iling Address				
298 INDIAN TRACE 7631 N.W. 6TH COURT							
WESTON FL 33326 PLANTATION FL 33324							DO NOT WRITE IN THIS SPACE
US							3. Date Incorporated or Qualifed
							08/03/1995
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For	
-	00 01 2 00	26					65-0607159 Not Applicable
21 Suite, Apt. #	, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired
22			27				
City & State		City & State					6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Added to Fees
23		28					This corporation owes the current year Intangible
Zip Country							Personal Property Tax.
24	25	29	stand Agent	30			10. Name and Address of New Registered Agent
	9. Name and Address of Curre	nt Regis	stered Agent		81	Name	
BECK	ER, MAXINE						et Address (P.O. Box Number is Not Acceptable)
	N.W. 6TH COURT				82	Street	et Address (P.O. Box Number is Not Acceptable)
	TATION FL 33324				83		
					84	City	85 Zip Code
				_	l.	1	
11. Pursuant t	o the provisions of Sections 607.05	02 and 6	07.1508, Florida Statu	les, the a	bove	e-named	ed corporation submits this statement for the purpose of changing its registered prporation's board of directors. I hereby accept the appointment as registered
	gistered agent, or both, in the Stati n familiar with, and accept the oblig						
GLONIATURE							DATE
SIGNATURE	Signature, typed or printed name of registered ag				Ager	nt signature i	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS A	ND DIRE	DELETE	13. 1.1 Ti	TI E		☐ Change ☐ Addition
TITLE	PD MANNE						
NAME	BECKER, MAXINE			1.2 NAME 1.3 STRE		TARODECC	
STREET ADDRESS	7631 N.W. 6TH COURT			1.4 CITY-5			
CITY-ST-ZIP	PLANTATION FL 33324	111111111111111111111111111111111111111			11-ZIP	☐ Change ☐ Addition	
TITLE	VD	- -					
NAME	CONCIN, ANDREW			T ADDRESS	zee l		
STREET ADDRESS	7651 14.10. 0111 000111			ST-ZIP			
CITY-ST-ZIP	DATIATION 12 00021		_	31-211	☐ Change ☐ Addition		
TITLE	TD PEONED KIMBEDI Y	-			IAME		
NAME	BECKER, KIMDERET			T ADDRESS	FSS		
STREET ADDRESS	· · ·			ST-ZIP			
CITY-ST-ZIP	SD		DELETE		TLE	01-20	Change Addition
TITLE	BECKER, ALLISON		-	4.2	NAME	į.	·
NAME	7631 N.W. 6TH COURT					T ADDRESS	ESS
STREET ADDRESS	PLANTATION FL 33324					ST-ZIP	
CITY-ST-ZIP TITLE	I CHITICHOTT I C COOLT		☐ DELETE		ITLE		☐ Change ☐ Addition
NAME				5.21	AME		
STREET ADDRESS				5.3 8	STREE	ET ADDRESS	ESS
1				5,4 (CITY-	ST-ZIP	
CITY-ST-ZIP TITLE			☐ DELETE	6.1	TITLE		Change Addition
NAME				6.21	NAME		
STREET ADDRESS				6.3	STRE	ET ADDRESS	RESS
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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

MOREW BETKER X 48/99

Daytime Phone #

DOE024 (41/08