

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 # P95000067098 (0)

1. Corporation Name

SILHOUETTE BODY WEAR CORP.



Principal Place of Business

Mailing Address

649 SW 9TH STREET  
APT. #103  
MIAMI FL 33130

649 SW 9TH STREET  
APT. #103  
MIAMI FL 33130

2. Principal Place of Business

21 235 12TH ST.  
Suite, Apt. #, etc.

2a. Mailing Address

26 2012 N.E. 122 RD  
Suite, Apt. #, etc.

22 City & State

23 MIAMI BEACH - FL  
Zip Country

24 33139 DADE

27 City & State

28 N. MIAMI FL.  
Zip Country

29 33181 DADE

3. Date Incorporated or Qualified

08/30/1995

3a. Date of Last Report

4. FEI Number

65-0604518

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

9. Name and Address of Current Registered Agent

SAINZ, JORGE R  
649 SW 9TH STREET  
APT. #103  
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name

JORGE R. SAINZ

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

2012 N.E. 122 RD.

83

84 City

N. MIAMI

FL

85 Zip Code

33181

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

PRESIDENT-SECRETARY (JORGE R. SAINZ)

1-30-96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	SAINZ, JORGE R	649 SW 9TH STREET #103	MIAMI FL 33130	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
VICE-PRESIDENT	VIVIAN SAINZ	63 SW. 31 RD	MIAMI - FL. 33129	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D.	JORGE R. SAINZ	2012 N.E. 122 RD	N. MIAMI - FL 33181	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
PRESIDENT-SECRETARY

1-30-96 (305) 863-8680

DATE

Daytime Phone #

CR2E034 (12/95)