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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000067130 (1)

RJH FASHION CORP.

Principal Place of Business

730 SAND LAKE ROAD, ROOM #134 730 SAND LAKE ROAD, ROOM #134 THE TERRACE AT FLORIDA MALL THE TERRACE AT FLORIDA MALL ORLANDO FL 32809 ORLANDO FL 32809-7747 3. Date Incorporated or Qualified 3a. Date of Last Report 08/30/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3331711 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country  $Z_{\rm 1D}$ 7ip Country 8. This corporation has liability for intangible tax under s. 199.032, 29 Florida Statutes Yes No 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE LAW FIRM OF LAWRENCE J-SPIEGEL CHRTD Gabe 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 CORAL GABLES FL-33134 83 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 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, am familiar, with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change . Addition **PSTD** 1.1 TITLE THE LOTFY-GABER, HEND NAME 1.2 NAME 730 SAND LAKE ROAD, ROOM #134 STREET ADORESS 1.3 STREET ADDRESS ORLANDO FL 32809 CHY-ST-ZIE 1.4 CITY-ST-7IP DELETE 2.1 TITLE Change Addition TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CHY-ST-Zir DELETE Change 3 1 TITLE Addition THEF NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP City-St-7iP DELETE Change Addition TITLE 4.1 TITLE NAMi 4. 2 NAME 4.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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.

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY - ST - ZIP

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

STREET ADORESS C(TY+\$1-20)

STREET ADORESS

STREET ADDRESS

CITY ST-ZP

THILE

NAME

Muf NAM

DELETE

DELETE

Daytimu Fhone #

Change

Addition

Addition

**FILED** 

May 09 1997 8:00am

Secretary of State