


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

FILED

Jan 30 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 # P95000068597 (0) 1. Corporation Name THE GARMENT DISTRICT, INC.					
Principal Place of Business 8941 QUALITY ROAD BONITA SPRINGS FL 33923 US			Mailing Address 8941 QUALITY ROAD BONITA SPRINGS FL 33923 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/01/1995	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 65-0607492	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent HERSCH, CRAIG R 2121 W. FIRST ST. FT. MYERS FL 33901 <i>DELETE</i>				10. Name and Address of New Registered Agent 81 Name SAVAGE STEWART W. 82 Street Address (P.O. Box Number is Not Acceptable) 6719 WINKLER RD, SUITE 218 83 84 City FT. MYERS FL 85 Zip Code 33919	
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 <i>Stewart W. Savage</i> DATE 1/12/98 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE <input checked="" type="checkbox"/> DELETE			1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME ZWICK, JEFFREY J			1.2 NAME		
STREET ADDRESS 4111 LORENE DR. #309			1.3 STREET ADDRESS		
CITY-ST-ZIP ESTERO FL			1.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE			2.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME P NANBERG, ROBERT L.			2.2 NAME		
STREET ADDRESS 5641 MONTILLA DR			2.3 STREET ADDRESS		
CITY-ST-ZIP FT. MYERS FL			2.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE			3.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME V THORNER, HEIDI			3.2 NAME		
STREET ADDRESS 356 EMERALD BAY CIR.			3.3 STREET ADDRESS		
CITY-ST-ZIP NAPLES FL 33963			3.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

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.

SIGNATURE:

*Robert L. Nanberg* ROBERT L. NANBERG 1/8/98 944-498-9379

CR2E034 (10/97)