

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

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000086249 (6)**

1. Corporation Name
SUPER FASHIONS VIII, INC.



Principal Place of Business 1865 NW 20TH ST MIAMI FL 33142	Mailing Address 1865 NW 20TH ST MIAMI FL 33142-7431
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3. Date Incorporated or Qualified 11/08/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0619558	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KOPELXASIX
1865 NW 20TH ST
MIAMI FL 33142**

81. Name Armando Estrada
82. Street Address (P.O. Box Number is Not Acceptable) 1865 N.W. 20th ST.
83.
84. City Miami
85. Zip Code FL 33142

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  **Armando Estrada - President** DATE **03-21-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE XXPSIX	<input type="checkbox"/> DELETE	1.1 TITLE PST/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME XXKOPELXASIX		1.2 NAME Armando Estrada	
STREET ADDRESS XX1865 NW 20TH ST		1.3 STREET ADDRESS 1865 N.W. 20th ST.	
CITY-ST-ZIP XXMIAMI FL 33142		1.4 CITY-ST-ZIP Miami, FL. 33142	
TITLE XXVP/D	<input type="checkbox"/> DELETE	2.1 TITLE VP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME XXESTRADA ARMANDO X		2.2 NAME Elisa Estrada	
STREET ADDRESS XX1865 GRAND CANAL DR X		2.3 STREET ADDRESS 1865 N.W. 20th ST.	
CITY-ST-ZIP XXMIAMI FL 33142		2.4 CITY-ST-ZIP Miami, FL. 33142	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		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	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-97

Date

Daytime Phone #

0196397

CR2E034 (9/96)