FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1	1996	7.9	CORPORATIONS		
DOCUN 1. Corporation	MENT # P9500	00088786 (5)		
AMER	ICAN INTIMATE APPAREL	TRADING CORP.			
Principal Place	of Business	Mailing Address			#41 06 1## 80 101 10101 #8#41 1406 1 10110 8111 1001
401 S.E. 10TH STREET 401 S.E. 10TH STREI SUITE 104 SUITE 104			ET		
DANIA FL 3	3004	Suite 104 Dania Fl 33004		3. Date Incorporated or Qualified	3a. Date of Last Report
				11/20/1995	Sa. Date of chore topore
2. Principal Plac	ce of Business	2a, Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0619262	Not Applicable \$8.75 Additional
22]		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s 199.032,
24	25 9. Name and Address of Current	29 t Registered Agent	30	Florida Statutes Yes 10. Name and Address of New R	
	<u>, , , , , , , , , , , , , , , , , , , </u>		81 Name		
			82 Street Add	iress (P.O. Box Number is Not Acceptab	le)
401 S.E. 10TH STREET SUITE 104			63		
	FL 33004		84 City		85 Zip Code
			- '		FL "
or registere	d agent, or both, in the State of Florid	la. Such change was authoriz	ed by the corporation's boa	ration submits this statement for the pur ard of directors. I hereby accept the app	rpose of changing its registered office ointment as registered agent. I am
tamiliar with SIGNATURE	n, and accept the obligations of, Section	on 607.0505, Florida Statutes	3 .		
S	Ignature, typed or printed name of registered agent in OFFICERS AND		OTE Registered Agent signature require 13.	ed when reinstating) ADDITIONS/CHANGES TO OFF	DATE
12.	D OFFICERS AND	DELETE	1. 1 TITLE	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	JUNIOR, NIVIO R		1.2 NAME		
STREET ADDRESS	401 S.E. 10TH ST. #104		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DANIA FL 33004 D	☐ DELETE	1.4 CITY-ST-ZIP 2. 1 TITLE		☐ Change ☐ Addition
NAME	MARTINS, GLAUCIA M	Deter	2.2 NAME		C Citange C Rection
STREET ADDRESS	401 S.E. 10TH ST. #104		2.3 STREET ADDRESS		
CITY-ST-ZIP	DANIA FL 33004		2.4 CITY - ST - ZIP		
TITLE	D	DELETE	3 1 TITLE		Change Addition
NAME OTOGET LOGDEGG	MARTINS-DRASKOVICH , V	ANIA M	3.2 NAME		
STREET ADDRESS	401 S.E. 10TH ST. #104 DANIA FL 33004		3.3 STREET ADDRESS 3.4 City-St-Zip		
CITY-ST-ZIP TITLE	DANIA I L 00007	☐ DELETE	4. 1 TITLE		☐ Change ☐ Addition
NAME		_	4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5. 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS 5.4 City-St-Zip		
CITY-ST-ZIP TITLE		☐ DELE1E	6. 1 TITLE		Change 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 v	vith this filing is voluntarily fun	nished and does not qualify hual report is true and accur	for the exemption stated in Section 119 ate and that my signature shall have the	.07(3)(k), Florida Statutes. I further same legal effect as if made under
oath; that I	am an officer or director of the corpo Block 12 or Block 13 if changed, or o	ration or the receiver or truste	e empowered to execute the	nis report as required by Chapter 607, Fi	orida Statules; and that my name

SIGNATURE: Varia m martins - Draskovich Apr 26, 1996 (954) 925-8659

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Desire Proce F

VANIA M MARTINS - DRASKOVICH

Apr 26, 1996 (954) 925-8659