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May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000091310 (9)

1. Corporation Name
MARCE SHIRT MAKER INC.



Principal Place of Business

1312 CORAL WAY
MIAMI FL 33145

Mailing Address

1312 CORAL WAY
MIAMI FL 33145-2058

3. Date Incorporated or Qualified
11/29/1995

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 326 SW 7ST

2a. Mailing Address

26 326 SW 7ST

4. FEI Number
65-0842513

Applied For
Not Applicable

Suite, Apt. #, etc.

22 #2

Suite, Apt. #, etc.

27 #2

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23 MIAMI FL

City & State

28 MIAMI FL

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

24 33130

Country

25 U.S.A.

Zip

29 33130

Country

30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

IVONNE BECHARA RICE
1312 CORAL WAY
MIAMI FL 33145

10. Name and Address of New Registered Agent

81 Name SAULO N. DECCACHE

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

326 SW 7ST #2

83

84 City MIAMI

FL

85 Zip Code 33130

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

Saulo Nacim Deccache

Saulo Nacim Deccache

04-25-97

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD
NAME RICE, IVONNE B.
STREET ADDRESS 1312 CORAL WAY
CITY-ST-ZIP MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR ☒ Change ☐ Addition
1.2 NAME MARIANO ARCE
1.3 STREET ADDRESS 237 SW 13ST
1.4 CITY-ST-ZIP MIAMI FL 33130

2.1 TITLE President ☒ Change ☐ Addition
2.2 NAME SAULO N. DECCACHE
2.3 STREET ADDRESS 326 SW 7ST
2.4 CITY-ST-ZIP MIAMI FL 33130

3.1 TITLE SECRETARY ☒ Change ☐ Addition
3.2 NAME ANTONIO RODRIGUEZ
3.3 STREET ADDRESS 237 SW 13ST
3.4 CITY-ST-ZIP MIAMI FL 33130

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 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.

SIGNATURE: ☒

Saulo Nacim Deccache

Saulo Nacim Deccache 04-25-97 (305)854-7205

Date

Daytime Phone #

CR2E034 (9/96)