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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025048 (5)

ANYTHING GOES OUTLET, INC.

## **FILED** Apr 23 1998 8:00am Secretary of State



Trincipal Flace Of Eldaniess		Mailing Address				
	ATLANTIC AVENUE	2134 WEST ATLANTIC AVENUE				
DELRAY BEACH FL 33444		DELRAY BEACH FL 33444			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					03/21/1996	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number Applied For	
21 26					Typhica to	
Suite, Apt	#. elc		Suite, Apt. #, etc		22-3475064 Not Applicable	
22		27			5. Certificate of Status Desired	
City & State City & Sta			tate			
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Ζιρ	Country	Zip	Country	· · · · · · · · · · · · · · · · · · ·	This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30.	
	9. Name and Address of Curr		1001	····	10. Name and Address of New Registered Agent	
SH	HEPARD, LESKAR & LEVINE, P.		81	Name		
409 S.E. 7TH STREET						
	I. LAUDERDALE FL 33301		82 Str		ddress (P.O. Box Number is Not Acceptable)	
F1	LAUDERDALE FL 33301		83	ļ		
			84	City	85 Zip Code	
44 0	10	FOO TORSELLE		l	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	am familiar with, and accopt the cibil	Righerd and title if hypothesible (NO			quired when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TOLE		Change Addition	
NAME	BAYARSKY, MARK		1.2 NAME			
STREET ADDRESS	1229 AVENUE Y		1.3 STREET	ADDRESS		
CITY - ST - ZIP	BROOKLYN NY		1.4 CITY - S	T-7 P		
TITLE		☐ DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE1	ADDRESS		
CITY - ST - ZIP		. ,	2. 4 CITY - 5	ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE	1	DELETE	3.1 TITLE		Change Addition	
NAME			32 NAME	]		
STREET ADDRESS			3.3 STREET	ADDRESS		
CHY-SI-ZIP			3.4. CITY-5	ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAMŁ			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S			
TITLE		☐ DELETE	5 1 TITLE		Change Addition	
NAME			5 2 NAME		_ · <del>_</del>	
STREET ADDRESS			53STREE1	ADDRESS		
CITY - \$1 - ZIP	ĺ		54 CITY-S			
TITLE		DELETE	6.1 TITLE	, All	Change Addition	
NAME			62 NAME		El challe El Madalli	
STREET ADDRESS			63 STREET	ADDRESS		
CITY-ST-ZIP				ľ		
0/11:31:ZIP	<u> </u>		6.4 City-S	1-2112		

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, optor an attachment with an address.