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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000042787 (7)

T-SHIRT EXPRESSIONS, INC.

FILED Mar 19 1998 8:00am Secretary of State

Principal Place	of Business	Mailing Address		-{	ili 80111 81890 11911 19001 10111 188) 1601
2508 NW 2ND AVE. BOCA RATON FL 33431		2508 NW 2ND AVE. BOCA RATON FL 33431		20 107 1107	- 11. 7/10.00 .00
NEW ADDRESS 2522 NW			1 2ND AVE	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
2522 1	UW 2ND NO	# 1 B-2- 100	0 0 // **	05/20/1996	
	age of Business	2a. Mailing Address	- 10	4. FEI Number	Applied For
21 252	2 NW 2 ND NE	26 2522 NW	mo W	65-0675191	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & State 28 BOCA LATO	A FL	6. Election Campaign Financing	\$5.00 May Be
23 1200 (Zip	Country	28 BOCA (CAGO	Country	Trust Fund Contribution 8. This corporation owes or has pa	
24 3343	25		<u>o</u>	Personal Property Tax due June	<u> </u>
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
NEWMAN, MICHELLE 81 Name					
2508 NW 2ND AVE.			82 Street Addre	ess (P.O. Box Number is Not Acceptal	ple)
BOCA RATON FL 33431			252	> NN 200 W	<u> 8 </u>
			80		
			84 City		FL 85 Zip Code
11. Pursuant t	o the provisions of Sections 607.0502	and 607,1508, Florida Statutes	the above-named corpo	oration submits this statement for the	<u> </u>
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 objections of, Section 607.0505, Florida Statutes.					
SIGNATURE	+ Ml. Lullo Mel	MAN			3/16/98
SIGNATURE			Registered Agent signature require		PATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS	NEWMAN, MICHELLE 7867 NW 11TH ST.		1.2 NAME		
CITY-ST-ZIP	PLANTATION FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	VD	DELETE	2.1 TITLE		Change Addition
NAME	ELKIN, MELVYN		2.2 NAME		
STREET ADDRESS	107046-3 BOCA CLUB BLVD.		2.3 STREET ADDRESS	•	z ·
CfTY-\$1-ZIP	BOCA RATON FL		2. 4 City-St-ZIP		
TITLE		☐ DELÉTE	3.9 TITLE		Change L. Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change
NAME			4. 2 NAME		C Charge C Patricia
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		•
TITLE		DELĒTE	5.1 TITLE		Change L. Addition
NAME			5.2 NAME		·
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME APPER APPER			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		•
	ertify that the information supplied with				
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 13 if changed, or on an attachment with an address.					