SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000078071 (3)

IMPACT CLOTHING, INC.

Principal Place of Business

Mailing Address

FILED Aug 12 1997 8:00am Secretary of State



20423 STATE ROAD 7 SUITE 249 BOCA RATON FL 33498			20423 STATE ROAD 7 SUITE 249 BOCA RATON FL 33498							DO NOT	WRITE	E IN THIS	SPACE			
							3	3. Date inc	corporate 9/1996		alified	3a. Di	ate of I	ast R	eport	
2. Principal Pl	lace of Business	26. Mailing Address				4	4. FEI Nun	nhar	071	200	47		 -	plied For		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				6	5. Certifica							Additional equired	
City & State			City & State					6	6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fer							
Zip 24	25	ountry	Zip 29	30					8. This corporation owes or has paid the current year Intendible Personal Property Tax due June 30. Yes No							
		ddress of Current	Registered Ag	ent		81	Nam		0. Name a	and Add	ress of I	New Re	gistered	Agent		
KWONG, ANNIE 20423 STATE ROAD 7 SUITE 249							rvain	3								
204 B0					Strec	t Address (ess (P.O. Box Number is Not Acceptable)									
						63										
						84	City			•			FL	85	Zip (Code
office or re	eaistered agent, or	Sections 607.0502 both, in the State of accept the obligat	f Florida, Such	change was	authorize	d by	the co	d corporation's	ion submit board of	s this sta directors	itement f . I hereb	or the p y acce	ourpose o	f chang ointme	ging it ent as	s registered registered
SIGNATURE																
12,	Signature, lyped or printe	o name of registered agent		(NO		d Age	nt signatu	re required who			VOEO TO	OFFI	DATE	DIDE	OTOD	0.10.40
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NAME	KWONG, ANI	MIE		Deter	1.0 I									ال لية	ioi igo	Addition
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CITY-ST-ZIP						ITY-S										
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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 of 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.

Call Marine Comment and a

7/20/07 954,24/ 2799