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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS.

DOCUMENT #

P96000087377 (3)

JEANS U.S.A., INC.

FILED Jan 26 1998 8:00am Secretary of State

|--|--|--|

Principal Plac	oal Place of Business Mailing Address			 E FAMIINAN IIM LATIN ARESI ANIII MUTII RATIS W		fi ikana i						
16 WEST F	LAGLER STREET		16 WEST FLAGLER ST	REET								
MIAMI FL 3			MIAMI FL 33130					55 NOT WEST WIT		D. 65		
								DO NOT WRITE IN T	115 51	PACE		
								3. Date Incorporated or Qualified				
			11-9i					01/01/1997			, , , , , , , , , , , , , , , , , , , 	
-	lace of Business	h	Mailing Address					4. FEI Number		-	+	olied For
21	7	26	Duite Sut # ata					45-0705824		40.5		Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired				dditional guired
City & State		27	City & State									<u> </u>
	#	22	City & State	:				6. Election Campaign Financing Trust Fund Contribution		\$5.I	UU N	May Be
Zip	Country	28	Zip	Col	intry	,						
24	25	29	Lip	30	y			 This corporation owes or has paid the Personal Property Tax due June 30. 	X	Yes		. No
24	9 Name and Address of Curren		stered Agent	30	1			10. Name and Address of New Registe	red A	_		
D	ITAN, ITZHAK				81	Na	ame			-		
	8 West Flagler Street					<u> </u>						
-	•				82	St	reet Addres	ss (P.O. Box Number is Not Acceptable)				
M	IIAMI FL 33130				83							
					84	Ci	ity		=[_	85 7	Zip C	ode
	10.15.07.070	8 3 8	107 4500 Florido Chalu							oboooir	II	ragistared
office or r	egistered agent, or both, in the State	of Flori	da. Such change was	authorize	d by	the	corporatio	ration submits this statement for the purpoin's board of directors. I hereby accept the	appo	intmen	t as n	egistered
agent. i a	m familiar with, and accept the obliga-	ations o	f, Section 607.0505, Fl	iorida Sta	tutes	\$.						
SIGNATURE			Manager (SIO)	÷				when reinstating) DA				
12.	Signature, typed or printed name of registered age OFFICERS ANI			13.	o Age	ant aig	griature required	ADDITIONS/CHANGES TO OFFICERS		DIREC	TORS	IN 12
TITLE	D		DELETE	1.1 T	ITLE			ABSTHOROGO PAROLO NO OTFICE IO		Chan		Addition
NAME	BITAN, ITZHAK			1.2 N							-	_
	1501 E. HALLANDALE BEAC	HRIV	ID #226		TREET	ADDE	pree					
STREET ADDRESS	HALLANDALE FL 33009)((DE)	ID., WEEU									
CITY-ST-ZIP TITLE	D		☐ DELETE	2.1 T	ITY - S	1 - 415	-		7	Chan	ne	Addition
NAME	BITAN, MAYA			22 N					-		•	
	1501 E. HALLANDALE BEAC	יום ער	/D #228		TREET	ADDE	DECC.					
STREET ADDRESS	HALLANDALE FL 33009	N: DEV	ID., TEEO									
CITY - ST - ZIP	TALLANDALE FL 33009		DELETE	3.1 T	HITY-S	51-Zi	P			Chan		Addition
TITLE										0,10.1	g _o	, woncon
NAME				32 N								
STREET ADDRESS					TREET							
CITY - ST - ZIP			☐ DELETE		XTY-S	ST-ZIF	P			Chan	пе	Addition
TITLE			T DEFEIE	4.1 T			ŀ		1	valdi	go.	
NAME				4.21			200					
STREET ADDRESS					TREET							/
CITY-ST-ZIP			ner erre		my-s	IT - ZIP			r	Chan		Addition
TITLE			☐ DELETE	5.1 T					1	0181	Ac	T VOČINOLI
NAME				5,2 N								
STREET ADDRESS					TREET		i i					
CITY+ST-ZIP					ITY-S	T-ZIP	2		-	Ċh		Addition
TITLE			☐ DELETE	6.1 T			ŀ		1	Chan	ЙG	TT MOUNTON
NAME				6.2 N			}					
STREET ADDRESS					TREET							
CITY-ST-ZIP	***		2m :	6.40	ITY-S	T-ZIP	> =	The Manager Parks Annual Control		便,准27	a. : •	
14. Thereby c	entity that the information supplied w	ith this f	tiling does not gualify f	or the ex	empi	นอก	stated in Si	ection 119.07(3)(i), Florida Statutes. I furth	II COU	any mat	trie i	HOMBRION

reflectly ceasy that the information supplied with this hims does not qualify for the exemption stated in Section 119.07(5)(), Florida Statutes. I transfer detugy 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.