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

Mar 25 1998 8:00am **PROFIT** (FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P96000091126 (8) ESTEBAN & JESUS UNISEX INC. Principal Place of Business Mailing Address 1191 W. 35 ST. 1191 W. 35 ST. HIALEAH FL 33012 HIALEAH FL 33012 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/06/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 65-0705510 Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & Stato City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name ACCION, JESUS 1191 W. 35 ST. Street Address (P.O. Box Number is Not Acceptable) 82 HIALEAH FL 33012 83 City Zip Code \$ 697.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered flug States of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by by buttons of, Section 607.0505, Florida Statutes. Pursuant to the provisions of Sectorice or registered agent, or both agent I am familiar with, and ac SIGNATURE strict agest and tile if applicable (NOTE: Bog stored Agent signature required when reinstating) CR2E034 (1097 HICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 11 Title NAME ACCION, JESUS 1.2 NAME STREET ADDRESS 1191 W. 35 ST. 1.3 STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY: ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-S1-ZIP DELETE Change Addition TITLE 6.1 TITLE

6.2 NAME

63 STREET ADDRESS

6.4 CITY - ST - ZIP

FILED

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 eath, 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: λ

NAME

STREET ADORESS

CITY-ST-ZIP

3/18/98