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Mar 24, 1999 8:00 am
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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P97000000132

1. Corporation Name
T & C LADIES WEAR, INC.

Principal Place of Business: 9882 GLADES RD E3 BOCA RATON FL 33434
 Mailing Address: 9882 GLADES RD E3 BOCA RATON FL 33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/01/1997
 4. FEI Number: 59-2237910 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
COLEMAN, ANTHONY G JR
 9882 GLADES RD E3 BOCA RATON FL 33434

10. Name and Address of New Registered Agent
 81 Name: Carl Stein
 82 Street Address (P.O. Box Number is Not Acceptable): 9882 Glades Rd #E3
 83 City: Boca Raton
 84 City: Boca Raton FL 85 Zip Code: 33434

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Carl Stein Carl Stein President 3/16/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
 TITLE: D
 NAME: COLEMAN, ANTHONY G JR
 STREET ADDRESS: 6363 N.W. 6 WAY, SUITE 210
 CITY-ST-ZIP: FORT LAUDERDALE FL 33309

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE: D Change Addition
 1.2 NAME: Carl Stein
 1.3 STREET ADDRESS: 9882 Glades Rd #E3
 1.4 CITY-ST-ZIP: Boca Raton, FL 33434

14. 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carl Stein SIGNATURE REQUIRED 3/16/99 (561) 883-9929
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (1/98)