FILE NOW: FILING FEE AFTER MAY 1ST IS \$557.00

PROFIT CORPORATION ANNUAL REPORT

.1998



FLORIDA DEPARTMENT OF TATE

Secretary of State v DIVISION OF CORPORATIONS

P97000036184 (4) DOCUMENT

NORTHPORT JEAN COMPANY, INC.

FILED Jun 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					. 1254465 110 15111 15511 55111 55111 55111 55111	ING SHOT (150)	1831(B) B) (BB)	
1850 SE 17 STREET BAY #206 1850 SE 17 STREET BAY FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316					DO NOT WRITE IN THI S S PACE			
					3. Date Incorporated or Qualified	- CITICE		٦
					04/21/1997			
2. Principal P	Place of Business	2a. Mailing Address			4. FEI N' mber	<u></u>	Applied For	7
21		26			65-078803	8	Not Applicable	,]
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8 75 Additional		
City & Stat	e	City & State 28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip Country		Ζφ	Zip Country		8. This corporation owes or has paid the current year Intangible			7
24 25		29	30		Personal Property Tax due June 30. Yes No			╛
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent		4
	AIRE, ROBERT I			81 Name				1
7280 W PALMETTO PARK RD STE 108 BOCA RATON FL 33433				82 Street Add	ddress (P.O. Box Number is Not Acceptable)			1
				B3				1
			-	84 City		85 Zi	ip Code	4
				City	F	L °° ′	p Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State i im familiar with, and accept the obliga	of Florida. Such change was:	authorized	by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing pointment	its registered as registered]
SIGNATURE								
	Signature, typed or printed name of regestered ages			Agout signature requ	ired when reinstating) DATE	ID DIDEOT	000 (1) 10	- E
12.	OFFICERS AND	DELETE	13. 1.1 Till	<u> </u>	ADDITIONS/CHANGES TO OFFICERS A	OD DIRECTO		CR2E034 (10/97)
NAME MILLER, ERROHL		LI otte	1.2 NAME			Chang	s Addition	15
STREET ADDRESS	1850 SE 17 ST #206							엉
PETALIDEDDALE EL ASSAS			1.3 STHEET ADDRESS 1.4 CHY-ST-ZIP					핑
CITY-ST-ZIP	0	DELETE	2.1 TITU			Chang	e Addition	ᅱ띥
NAME	MILLER, JAMIE	LL Otter	22 NA		· a	L.J Onnig	, Li rodilion	-
STREET ADDRESS	4000 00 40 00 4000			EE1 ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL 33316			Y-ST-ZIP				
TITLE	The state of the s		3 1 7111			Change	e	-
NAME	HADAFA HINITED		3 2 NAM			v		
STREET ADDRESS	1850 SE 17 ST #206		1	EET ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL 33316			Y - ST - ZIP				
TITLE		DELFTE	4.1 111			Change	e Addition	1
NAME			4. 2 NA	ME			•	
STREET ADDRESS			. I	EF1 ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		DELFIE	5.1 1171			Change	e Addition	1
NAME			5.2 NAM			-		
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				(-ST-ZIP				
TITLE		DELFTE	6.1 TITE			☐ Change	e Addition	7
NAME			6.2 NAM		5000025675 -06/22/38010440	35	11.0	
STREET ADDRESS				EET ADDRESS	- 06/22/9801044- <i>-</i> -0	42	JY .17	
CITY-ST-ZIP				7-ST-ZIP	94.第15日。日日		· V	
			V VIII.	··· - · · · ·				

14. Thereby 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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an alternative that address.