## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

2a. Mailino Address

City & State

Zip

Suite, Apt. #, etc.

26

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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Country

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13.

DELETE

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DELETE

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DELETE

1.1 TITLE

1.2 NAME

2.1 TITLE

2.2 NAME

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 6.4 CITY-ST-ZIP

30

DOCUMENT # P97000046668 (4)

KAO'S FASHIONS, INC.

2, Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIF TITLE

CITY-ST-ZIF TITLE

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

12.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

NAME STREET ADDRESS

NAME

Principal Place of Business Mailing Address 222 NW 162 AVE. 222 NW 162 AVE. HOLLYWOOD FL 33026 HOLLYWOOD FL 33028

Country

9, Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

25

ROBLES, ALBERTO

HOLLYWOOD FL 33028

HOLLYWOOD FL 33028

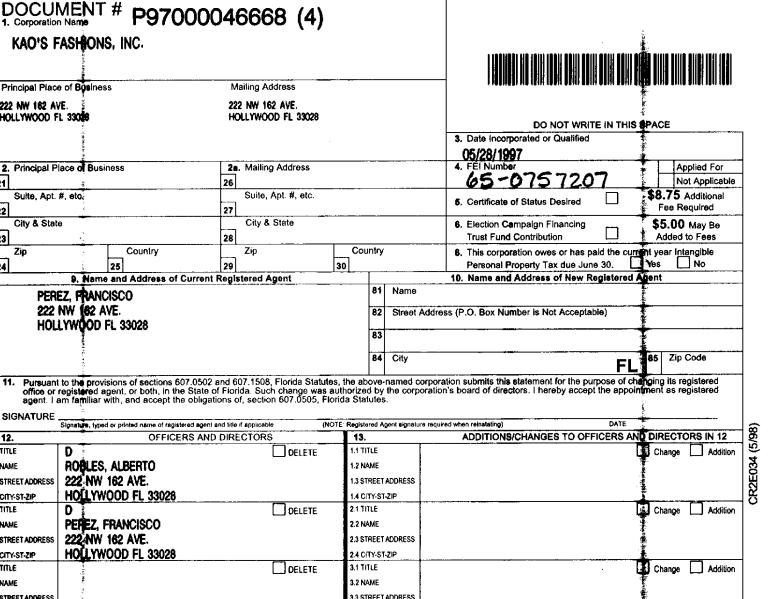
PEREZ, FRANCISCO

222 NW 162 AVE.

222 NW 162 AVE.

PEREZ, FRANCISCO 222 NW **(6**2 AVE. HOLLYW**OO**D FL 33028

## **FILED** Aug 13 1998 8:00am Secretary of State



CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this fiting 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 report of true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if Page 19 is paged 19 is paged 19 if Page 19 is paged 19 is paged 19 if Paged 19 is paged 19 is paged 19 if Paged 19 is paged 19 is paged 19 if Paged 19 is pa

SIGNATURE:

305-688-1716

Change

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Addition

Addition