Applied For

Fee Required

\$5.00 May Be

Added to Fees

□No

Not Applicable \$8.75 Additional

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

PROFIT CORPORATION ANNUAL REPORT,

1999.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000059761

Country

9. Name and Address of Current Registered Agent

25

REBOUL, JEAN-CLAUDE

1. Corporation Name

Suite, Apt. #, etc.

City & State

23

24

Zip

STREAM INF CLOTHING, INC.

Officiality occitation are		
Principal Place of Business	Mailing Address	_
7010 S.W 48TH LANE MIAMI FL 33155	7010 S.W 48TH LANE MIAMI FL 33155	
2. Principal Place of Business	2a. Mailing Address	

27

28

29

Suite, Apt. #, etc.

City & State

Zip

May 04, 1999 8:00 am Secretary of State 05-04-1999 90220 016 ***158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed 07/08/1997 4. FEI Number

5. Certifcate of Status Desired

Trust Fund Contribution

Personal Property Tax.

Street Address (P.O. Box Number is Not Acceptable)

Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

65-0794815

7010 S.W 48TH LANE		82	32 Street Address (P.O. Box Number is Not Acceptable)								
MAIM	AI FL 33155		83								
			84	City	FI	85	Zip Co	ode			
44 Durationt	to the provisions of Sections 607.0502 and 607.1508. Flori	da Statutes, the al	nve-		t compration submits this statement for the purpose of	changi	ng its re	gistered			
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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Perintered	Agent	ekonatura	required when reinstating) DATE			\			
12.	OFFICERS AND DIRECTORS	13.	- Saur	agraturo	ADDITIONS/CHANGES TO OFFICERS A	ND DIR	ECTOR	S IN 12			
TITLE		ELETE 1.1 TIT	Œ			☐ Ch	ange	☐ Addition			
NAME	REBOUL, JEAN-CLAUDE	1.2 NA						,			
STREET ADDRESS	7010 SW 48TH LN	1.3 ST	REET	ADDRESS	\$			Ì			
CITY-ST-ZIP	MIAMI FL 33155	1.4 CF	ry-st-	-ZIP							
TITLE	S 🗆 0	ELETE 2.1 Til	LE			Ch	ange	☐ Addition			
NAME	REBOUL, GAELLE	2.2 NA	ME								
STREET ADDRESS	7010 SW 48TH LANE	2.3 ST	REET	ADORESS				Ì			
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CITY-ST-ZIP			TY-ST	-ZIP				CT A A ARREST			
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NAME	-	4.2 N	AME								
STREET ADDRESS		4.3 ST	REET	ADDRESS	5			Ì			
CITY-ST-ZIP			TY-ST-	-ZIP							
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NAME		5.2 NA									
STREET ADDRESS				ADDRESS	3			}			
CITY-ST-ZIP			TY-ST-	-ZiP							
TITLE	, <u>[</u>] D	ELETE 6.1 TT				☐ Ch	ange	Addition			
NAME		6.2 NA						ļ			
STREET ADDRESS				ADDRESS	3			}			
CITY-ST-ZIP			TY-ST-		The state of the s	_1.E . AL -	4 AL - 1 - 1				
14. I hereby o	ertify that the information supplied with this filing does not	qualify for the exe	mptic	n state	ed in Section 119.07(3)(i), Florida Statutes. I turther co	rriry ma Ier oath	thati:	ormation an an			

Country

Name

30

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.