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FILED  
May 28 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000060910 (1)  
1. Corporation Name

EXCLUSIVE DESIGNS AND MANUFACTURING INC.



Principal Place of Business

1020 EAST 32ND STREET  
HIALEAH FL 33013

Mailing Address

1020 EAST 32ND STREET  
HIALEAH FL 33013

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/14/1997

4. FEI Number

65-0769191

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1020 E 32 ST  
Suite, Apt. #, etc.

22 HIALEAH FL

23 City & State

24 33013

Country

25 DADE

2a. Mailing Address

26 SAME  
Suite, Apt. #, etc.

27

City & State

28

Country

29

30

9. Name and Address of Current Registered Agent

TALKOV, MICKEY  
1020 EAST 32ND STREET  
HIALEAH FL 33013

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0506, Florida Statutes

SIGNATURE

*Mickey Talkov*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-21-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME MICKEY TALKOV

STREET ADDRESS 5900 ARLINGTON AVE

CITY-ST-ZIP AVERDALE NY 11704

TITLE ☐ DELETE

NAME VILE PRES.

STREET ADDRESS 800 WILLIS AVE

CITY-ST-ZIP ALBANY NY 11705

TITLE ☐ DELETE

NAME MICHELE TALKOV

STREET ADDRESS 3675 N. COUNTRY CLUB DR.

CITY-ST-ZIP AVENTURA FL 33180

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE

*Mickey Talkov*

4-21-98 (305) 1011117

CR2E034 (10/97)