2000 UNIFORM BUSINESS REPORT (UBR)

01-14-2000 90031 030 ***150.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR -11 AM 11:44

A0003371

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000061636

1. Entity Name

SOUTHERNMOST SWIMWEAR, INC.

Principal Place of Business	Mailing Address
507 B SOUTH ST. KEY WEST FL 33040	507 B SOUTH ST. KEY WEST FL 33040-3165

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 17-2588032 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~DAVILA, GREGORY D~~
~~513 FLEMING ST. STE. 1~~
~~KEY WEST FL 33040~~

7. Name and Address of New Registered Agent

Name JAMES J. McNALLY
Street Address (P.O. Box Number is Not Acceptable) 2655 Le Jung Rd. #804
City Coral Gables FL Zip Code 33134

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE James J. McNally (See Attached for Signature) DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCCLAIN, MICHAEL 3314 N. SIDE DR. #131 KEY WEST FL 33040	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MADDEN, ERIC 1313 SIMONTON ST. KEY WEST FL 33040	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

AD

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Michael P. McClain 1-7-00 305-294-[illegible]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DOCUMENT # P97000061636

SOUTHERNMOST SWIMWEAR, INC

This is an attachment for RA Signature only

AUUU3571

DO NOT WRITE IN THIS SPACE

6. FEI Number 17-2588032

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name: James J. McNally

Street Address (P.O. Box number is not acceptable): 3655 Co Road 2D. #504

City: Coral Gables FL Zip: 33134

4. Name and Address of Current Registered Agent

DAVILA GREGORY D
513 FLEMING ST. STE 1
KEY WEST FL 33040

8. I hereby submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: James J. McNally James J McNally 2/16/2000

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See terms on back) ☐

FILING FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

OFFICERS AND DIRECTORS

MCNALLY, MICHAEL
3314 N. SIDE DR. #131
KEY WEST FL 33040
D

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (11)

11. 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 report or supplemental 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 11 or Block 12 above, or on an attachment with an asterisk.

SIGNATURE: Michael D. McClain 1-7-00 305-