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

**CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000087718 (7)

THE T-SHIRT FACTORY, INC.

## **FILED** Apr 15 1998 8:00am Secretary of State



L.							
Pr	incipal Plac	ce of Business	Mailing Ac	idress			3 INDRINDAL IND INDIA LOBALS SALVI SOURT BOLLY TEINT TUKIT YOUR 1900) YANDI HAIF HOUR
		ON STREET	316 SIMO	NTON STREET			
1	KEY WEST FL 33040 KEY WEST FL 33040						DO NOT WRITE IN THIS SPACE
ŀ							3. Date Incorporated or Qualified
ŀ							10/10/1997
2.	Principal P	Place of Business	2a. Mailing	Address			4. FEI Number Applied For
21	21 2			26			65-078 7/50 Not Applicable
	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			•	\$8.75 Additional
22	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27					5. Certificate of Status Desired Fee Required
<u> </u>	City & Stat	te	City & !	State			6. Election Campaign Financing \$5.00 May Be
23		*	28				Trust Fund Contribution Added to Fees
	Zip	Country	Zip	<u> </u>	Country	/	8. This corporation owes or has paid the current year Intangible
24	<del></del> -	25   9. Name and Address of Curr	29	3	0		Personal Property Tax due June 30.  Yes No 10, Name and Address of New Registered Agent
$\vdash$	CC	RUSHER, KAREN E	on registered A	Jent	81	Name	· · · · · · · · · · · · · · · · · · ·
		6 SIMONTON STREET					
		EY WEST FL 33040			82	Street	eet Address (P.O. Roy Number is Not Acceptable)
	IV.	11 11201 12 30040			83		Annual Control Control
					84	City	y · FL 85 Zip Code ·
11	Pursuant	to the provisions of Sections 607.0	502 and 607.1508,	Florida Statutes	, the above	l e-named	med corneration submits this statement for the nurrose of changing its registered
	OTHER OF I	registered agent, or both, in the Sta im familiar with, and accept the ob-	ate of Florida, Such	change was au	horized by	/ the con	corporation's board of directors. I hereby accept the appointment as registered
614	SNATURE		inguitorio di, deditor	. 007.0000; 1 1011	au olalolo.	3.	
Sit		Signature, typed or printed name of registered	agent and trie if applicable	(NOTE F	Registered Age	ent signature	nature required when reinstaling) DATE
12		OFFICERS A	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITO	-E		İ	☐ DEŁETE	1.1 TITLE		P.T.S Change Addition Karen E. Frusher 316 Simonton, Street
NAME					1.2 NAME		Karen E. Frusher
	EET ADDRESS				1.3 STREET	ADDRESS	316 Simonton, Street
_	Y-ST-ZIP			Dr. Eve	1.4 CITY - S	T-ZIP	Key West FL 33040
TITL	1		i	DELET <b>E</b>	2.1 TITLE		☐ Change ☐ Addition
NA					2.2 NAME		
	EET ADDRESS				2.3 STREET		
TITL	Y-ST-ZIP			DELETÉ	2.4 CITY - 3 3.1 TITLE	ST - ZIP	Change Addition
NAA	i		'	OFFICE E	3.1 THEE		Li charge Li Addition
	EET ADDRESS				3.3 STREET	AUDBEGG	29:
	r-ST-ZIP				3.4. CITY - S		w
TITL				DELETE	4.1 TITLE	21 411	Change Addition
NAA	AE		·		4. 2 NAME		
STR	EET ADORESS				4.3 STREET	ADDRESS	282
•	-ST-ZIP				4.4 CITY - S		
TITL				DELETE	5.1 TITLE		Change Addition
NAN	ME				5.2 NAME		
STR	EET ADDRESS				5.3 STREET	ADDRESS	ss
CITY	-ST-ZIP				5.4 CITY-S		
TITE				DELETE	6.1 TITLE		Change Addition
NAN	(E				6.2 NAME		
STR	EET ADORESS				6.3 STREET	address	ss
CITY	-ST-ZIP				6.4 CITY-S		
				·	_		

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 emprowered 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

111. Del