## 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 #  1. Corporation Name	P98000006856
FIL A FIL SHIRTMAKI	FRS INC

1. Corporati	On Hame			<u>'</u> . '	
FILAF	IL SHIRTMAKERS,INC.			· ·	
8::::18				, 1100/1840 1440 1444 1444 1444 1444	
	ce of Business	Mailing Address		9/-	
	OWARD BLVD. #301 RDALE FL 33301	800 EAST BROWARD BLVD.		16	
TONT EXUDER	TOALE FE 33301	FORT LAUDERDALE FL 333	Л	DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualifed	
				01/22/1998	
	Place of Business	2a, Mailing Address	1. 42 0.0	4 FEI Number	Applied For
Suite, Apt	818 NW 112 AVE.		M M3 AUE	65-0806373	Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired [1]	\$8.75 Additional Fee Required
City & Sta	LAMI	City & State	i	6. Election Campaign Financing	<b>\$5.00</b> May Be
23 <u>M</u> Zip _	Country	28 MIMM	Country	Trust Fund Contribution	Added to Fees
<b>₄</b> ີ33	5472 <sub>25</sub>	[29] 33172 [	30	This corporation owes the current ye.     Personal Property Tax	ar Intangible []Yes []No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	ered Agent
OFF	TEGA. ALVARO		81 Name	ORTEGA, ALVARD	
	EAST BROWARD BLVD. #301		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	RT LAUDERDALE FL 33301			and the second of the second o	
			83	2818 NW M2 AVE	
			84 City	Henry	85 Zip Code
11 Pursuant	to the provisions of Sections 607.0502	and 607 1509. Florida Stotuto	1 Slots	MIAMI porabon submits this statement for the purpos	FL   3317 C
office or i	registered agent, or both, in the State of am familiar with, and accept the obligation	Florida Such change was au	prive by the corporat	polation starting this statement for the purpor tion's board of directors. Thereby accept the a	ppointment as registered
SIGNATURE		7EGA	nunes	-I	10/99
SIGNATURE		and title if applicable (No. 1	✓ Regisfered Agent signature require	end when rear statings. DAT	0.10/71
12.	OFFICERS AND	DIRECTORS /	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	D	DELETE	11 TITLE D		[A]Change [ ] Addition
NAME	ORTEGA, ALVARO	$\nu$		DRTEGA, ALVARO_	
STREET ADDRESS		)1		2818 NW MZ AVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301		14 CITY-ST-ZIF	MIAM : FL 33172	
TITLE		["] DELETE	2 I TITLE		[ ] Change 🙀 Addition
NAME			2 2 NAME	PALOP, RAFAEL	
STREET ADDRESS				2815 NM YIT AVE	
CITY-ST-ZIP				MIANI, FL 33,172	
TITLE		[] DELETE	3.1 TrTLF	army grows given army army same army army are	[]Change []Addition
NAME			3.2 NAME	2000,027,5	67825
STREET ADORESS			3.3 STREET ADDRESS		-01120011
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<b>M</b> LE			4 1 TITLE		[T] Change [   Addition
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0000 07 500		E, Decere	4-2 NAME 4-3 STREET ADDRESS		
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TITLE NAME			4 2 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME		[]Change []Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		[] DELETE	4 2 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TILLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS			4 2 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	[ ] Change [ ] Addition

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 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 allocking the statute of the corporation of the corporation of the corporation of the corporation of the statute of the corporation of th

64 OTY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ALVARO ORTEGA

Feb. 10/99 305-5910145