

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000011981

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90233 042 ***150.00

1. Corporation		,011001						
WORLD WIDE T-SHIRTS, INC.								
1								
٠		W					KANDO NIBA BARK	
Principal Place	e of Business	Malling Address						
2978 NW 31 A		2778 NW 31 AVE						
FT LAUDERDAL	E FL 33311	FT LAUDERDALE FL 33311		DO NOT WRITE IN THI	S SPACE			
					3. Date Incorporated or Qualifed			
ĺ					02/04/1998			1
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ар	plied For	1
21		26			65-0810698	No	t Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A			
22		27			S. Solidate of Color Color	Fee Re		ł
City & Stat	(B)	City & State			6. Election Campaign Financing	\$5.00		ί
23		28			Trust Fund Contribution	Added t	0 1005	ĺ
=-~Zip <i>-</i> ∞ -≃-	Country==	Zip		intry	= 28.=This corporation owes the current year.		□No	
24	25		30		Personal Property Tax. 10. Name and Address of New Registerer			İ
	9. Name and Address of Curre	ut Kedisteran Ağarıc		81 Name	TO. ITALITO DITO ACCIDED OF THE PROPERTY			i
JAM.	al, ralph							ŧ
	COCO PLUM MANOR			82 Street Addre	ess (P.O. Box Number is Not Acceptable)			ĺ
	NTATION FL 33321			83				ļ
Carrier and Carrie								
				84 City	F	85 Zip C	200e	ł
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the a	bove-named corpo	pration submits this statement for the purpose of	of changing its	registered	ĺ
office or n	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was at ations of Section 607,0505. Flor	thorized ida Stat	t by the corporatio utes.	oration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the submit of the purpose of the purp	ointment as reg	jistered	ŀ
	III ENIMINE WILL, ONC DOOCH INC CONG.	Tablic di, decider de reces, e :=			•		[Ĺ
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	Registered	Agent signature required				8
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	OD DIRECTO:	Addition	¥
TITUE	10		1.1 TI	1				<u>=</u>
NAME	JAMAL, RALPH		1270	1				8
STREET ADDRESS								ш
City-St-ZIP	PLANTAITON FL 33311			REET ADDRESS				<u> </u>
		Closists	140	TY-ST-ZIP		□ Change	☐ Addition	CR2E034 (11/98)
TITLE	D	☐ DELETE	14C	TY-ST-ZIP	<u> </u>	Change	Addition	CR2
NAME	D LEVY, CLAUDE	☐ DELETE	2.1 TC 2.2 NV	TY-ST-ZIP TLE WIE	· .	Change	Addition	CR2
NAME STREET ADDRESS	D LEVY, CLAUDE 10020 NW 2 STREET	☐ DELETE	2.1 TC 2.2 NV 2.3 ST	TY-ST-ZIP TLE AME TREET ADDRESS		Change	Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311		1 4 CI 2.1 TI 2.2 No 2.3 ST 2.4 C	TY-ST-ZIP TLE WAE TREET ADDRESS TTY-ST-ZIP		☐ Change	Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D	☐ DELETE	14Cl 21Tl 22N/ 23Sl 24G 31Tl	TY-ST-ZIP TLE WAE REET ADDRESS TTY-ST-ZIP TLE				CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN		2.1 T/C 2.2 N/C 2.3 ST 2.4 C/C 3.1 T/C 3.2 N/C	TY-ST-ZIP THE THEET ADDRESS TTY-ST-ZIP THE				CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE		2.1 T/ 2.2 N/ 2.3 S1 2.4 G 3.1 T/ 3.2 N/ 3.3 S1	TY-ST-ZIP TLE MME TREET ADDRESS TY-ST-ZIP TLE MME TREET ADDRESS				CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN		14 CI 21 TI 22 NV 23 ST 2 4 G 31 TI 32 NV 33 ST 34 C	TY-ST-ZIP THE THEET ADDRESS TTY-ST-ZIP THE				CR2
NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	DELETE	14 CI 21 TI 22 NV 23 ST 2 4 G 31 TI 32 NV 33 ST 34 C	TY-ST-ZIP TLE NME TREET ADDRESS TY-ST-ZIP TLE NME TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP		☐ Change	☐ Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	DELETE	14 CZ NV 23 ST 2.4 CG 31 TT 3.2 NV 3.3 ST 3.4 CG 4.1.TT 4.2 NV	TY-ST-ZIP TLE NME TREET ADDRESS TY-ST-ZIP TLE NME TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP		☐ Change	☐ Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	DELETE	14 CZ NZ 23 ST 22 AC 31 TT 32 NZ NZ 33 ST 34. CZ 4.1.TT 4.2 NZ AZ NZ 4.3 ST 4.4 NZ NZ 4.3 ST	TY-ST-ZIP TLE NME TREET ADDRESS TY-ST-ZIP TLE NME TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP TLE		☐ Change	Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	DELETE	14 CZ NZ 23 ST 22 AC 31 TT 32 NZ NZ 33 ST 34. CZ 4.1.TT 4.2 NZ AZ NZ 4.3 ST 4.4 NZ NZ 4.3 ST	TY-ST-ZIP TLE NAME TREET ADDRESS TTY-ST-ZIP TLE NAME TREET ADDRESS TY-ST-ZIP AAME REET ADDRESS TY-ST-ZIP		☐ Change	☐ Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	☐ DELETE	2.1 Tr 2.2 Nr 2.3 ST 2.4 G 3.1 Tr 3.2 Nr 3.3 ST 3.4 C 4.1.Tr 4.2 Nr 4.3 ST 4.4 Gr	TY-ST-ZIP TLE NAME TREET ADDRESS TY-ST-ZIP TLE NAME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE	2	☐ Change	Addition	- CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	☐ DELETE	14 CZ NV 23 ST 24 CZ NV 33 ST 34 CZ 41.TT 4.2 NV 4.3 ST 44 CZ 5.1 TT 5.2 NV	TY-ST-ZIP TLE NAME TREET ADDRESS TY-ST-ZIP TLE NAME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE		☐ Change	Addition	- CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	DELETE	14 CC 2.1 TC 2.2 NV 2.3 ST 2.4 CC 3.1 TT 3.2 NV 3.3 ST 3.4 .C 4.1 TT 4.2 N 4.3 ST 4.4 CC 5.1 TT 5.2 NV 5.3 ST 5.4 CC 2.1 TT 5.2 NV 5.3 ST 5.2 NV 5.3 ST 5.2 NV 5.3 ST 5.3	TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP		☐ Change ☐ Change ☐ Change	Addition Addition	- CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	☐ DELETE	14 CC 2.1 TC 2.2 NV 2.3 ST 2.4 CC 3.1 TC 3.2 NV 3.3 ST 3.4 . CC 4.1 TC 5.2 NV 5.3 ST 5.4 CC 6.1 TC 6.1 TC 7.5 TC	TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE MAE TREET ADDRESS TY-ST-ZIP TLE MAE TREET ADDRESS TY-ST-ZIP TLE MAE TREET ADDRESS TY-ST-ZIP TLE		☐ Change	Addition	- CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	DELETE	14 CC 2.1 TC 2.2 NV 2.3 ST 2.4 CC 3.1 TT 5.2 NV 5.3 ST 5.4 CC 6.1 TC 6.2 NV 6.2	TY-ST-ZIP TLE NAME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS		☐ Change ☐ Change ☐ Change	Addition Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LEVY, CLAUDE 10020 NW 2 STREET PLANTAITON FL 33311 D PERELMUTER, BENJAMIN 707 SE 3 LANE	DELETE	14 CC 2.1 TC 2.2 NV 2.3 ST 2.4 CC 3.1 TT 5.2 NV 4.3 ST 5.1 TT 5.2 NV 5.3 ST 6.2 NV 6.3 ST 6.2 NV 6.3 ST 6.2 NV 6.3 ST 6.3 ST 6.2 NV 6.3 ST 6.3	TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE MAE TREET ADDRESS TY-ST-ZIP TLE MAE TREET ADDRESS TY-ST-ZIP TLE MAE TREET ADDRESS TY-ST-ZIP TLE		☐ Change ☐ Change ☐ Change	Addition Addition	CR2

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 oeth; 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. Plorida 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.

SIGNATURE: ______k

Chiple lavy

13/99 (954) 486-658