## 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

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90043 049 \*\*\*158.75

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DOCUMENT #	P98000032025

1. Corporation Name

GREAT WHITE APPAREL, INC.

Principal Place of Business	Mailing Address					
350 GULF BLVD. INDIAN ROCKS BCH FL 33785	350 GULF BLVD. INDIAN ROCKS BCH FL 33	785				
	- Se Se		اليام المعاسم	DO NOT WRITE IN TH	HIS SPACE.	
				<ol> <li>Date Incorporated or Qualified</li> <li>04/06/1998</li> </ol>		X
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	App	olied For
21	26					Applicable
Suite, Apt. #, etc.	Suite, Apt, #, etc.			5. Certifcate of Status Desired	\$8.75 A	
22	27				Fee Re	·
City & State	City & State			6. Election Campaign Financing	<b>\$5.00</b> ( Added to	•
23	28	Country	<del></del>	Trust Fund Contribution	·	01662
Zip Country	Zip	30	y	This corporation owes the current year     Personal Property Tax.		□No
9. Name and Address of Curr	29 29 Agent	JU]		10. Name and Address of New Register		
3. Haine and Address Of Curr	19-14 TERRIPTOLOG ARBOIT	81	Name		<del>-</del>	
WEYLIE, WALLACE J			0	force (D.O. Day Number in Mat Accordance)		
350 GULF BLVD.		82	Street Add	fress (P.O. Box Number is Not Acceptable)		
INDIAN ROCKS BCH FL 33785		83	-		·	
					los z	
		84	City		<b>EL</b>   85   Zip C	ode
Pursuant to the provisions of Sections 607.0 office or registered agent or both; in the Stagent. I am familiar with, and accept the obline agent.	ite of Florida: Such change was a	uthorized by	/ the corborat		of changing its	registered gistered
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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 apattachment with an address with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

STREET ADDRESS

CITY-ST-ZIP