2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 03-10-2004 90024 034 ***150.00 **DOCUMENT # P98000059921** 1. Entity Name LOGO SHIRTS INTERNATIONAL, INC. Principal Place of Business Mailing Address 44016717 PO BOX 740102 PO BOX 740102 BOYNTON BEACH, FL 33474 BOYNTON BEACH, FL 33474 US Principal Place of Business Over 10 3. Mailing Addres 20980 Verano Wau prano 01082004 CR2E034 (10/03) City & State 4. FEI Number Applied For Bo<u>ca</u> City & State 65-0848211 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MICHAELSON, RIKKI P Street Address (P.O. Box Number is Not Acceptable) 20980 VERANO WAY BOCA RATON, FL 33433 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE MICHAELSON, ROBERT P NAME NAME verano way 20980 STREET ADDRESS PO BOX 740102 STREET ADDRESS hica hatin, CITY-ST-ZIP BOYNTON BEACH, FL 334740102 CITY - ST-ZIP CEO Change TITLE Addition TITLE Delete MICHAELSON, RIKKI P NAME NAME 20980 Verano STREET ADDRESS PO BOX 740102 STREET ADDRESS BOYNTON BEACH, FL 334740102 Boca Ratur FL CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP-CITY-ST-ZIP-TITLE ☐ Delete TITLE ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Addition ☐ Delete TITLE TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIE CITY - ST - ZIP 12. 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 cath; 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 10 or Block 11 if ROBERT P MICHATOLIN L 20.01 SIGNATURE:

FILED Mar 10, 2004 8:00 am

Daytime Phone #