

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000062615

FILED
Jan 21, 2008
Secretary of State

Entity Name: GILDAN ACTIVEWEAR (US HOLDINGS) INC.

Current Principal Place of Business:

2200 N COMMERCE PKWY
202
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

725 MONTEE DE LIESSE
MONTREAL, QC H4T 1P5 CA

New Mailing Address:

725 MONTEE DE LIESSE
MONTREAL, QC H4T 1P5 CA

FEI Number: 65-0852928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELUREN, MARK S
2200 N COMMERCE PKWY
STE 202
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: CHAMANDY, GLENN J
Address: 725 MONTEE DE LIESSE
City-St-Zip: MONTREAL, QC H4T1P5 CA

Title: T () Delete
Name: PARMAR, SHAUN
Address: 725 MONTEE DE LIESSE
City-St-Zip: MONTREAL, QC H4T1P5 CA

Title: EVP () Delete
Name: SELLYN, LAURENCE G
Address: 725 MONTEE DE LIESSE
City-St-Zip: MONTREAL, QC H4T1P5 CA

Title: DLSC () Delete
Name: MATTHEWS, LINDSAY
Address: 725 MONTEE DE LIESSE
City-St-Zip: MONTREAL, QC H4T1P5 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PARKER, PAUL
Address: 602 EAST MEADOW ROAD
City-St-Zip: EDEN, NC 27288 US

Title: VPTD (X) Change () Addition
Name: VOIZARD, DAVID
Address: 725 MONTEE DE LIESSE
City-St-Zip: MONTREAL, QC H4T 1P5 CA

Title: SD (X) Change () Addition
Name: ALBRIGHT, MICHAEL
Address: GILDAN HOUSE, 34 WARRENS
City-St-Zip: ST. MICHAEL, XX 00000 BA

Title: D (X) Change () Addition
Name: HOFFMAN, MICHAEL
Address: GILDAN HOUSE, 34 WARRENS
City-St-Zip: ST. MICHAEL, XX 00000 BA

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL PARKER

PD

01/21/2008

Electronic Signature of Signing Officer or Director

_____ Date