

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

05-10-1999 90147 048 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000076407

1. Corporation Name
VERTICAL CLOTHING CORPORATION

Principal Place of Business
 13125 NW 47TH AVE.
 OPA LOCKA FL 33054

Mailing Address
 13125 NW 47TH AVE.
 OPA LOCKA FL 33054

597470 - 90012 - 12



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

3. Date Incorporated or Qualified
08/31/1998

4. FEI Number
65-0880683

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

RUSSIN, PETER D ESQ.
 2420 FIRST UNION FINANCIAL CENTER
 200 S BISCAYNE BLVD
 MIAMI FL 33137

VINCENT ARMINIO
 10863 DENVER DRIVE
 Coopercity, FL 33026

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City FL AS Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **7/15/99**

12. PRESENT OFFICERS AND DIRECTORS

TITLE	STEVEN GREENBERG <input type="checkbox"/> DELETE
NAME	STEVEN GREENBERG
STREET ADDRESS	10120 WEST BROADVIEW DRIVE
CITY-ST-ZIP	BAY HARBOR, FL 33154
TITLE	V. PRESIDENT <input type="checkbox"/> DELETE
NAME	VINCENT ARMINIO
STREET ADDRESS	10863 DENVER DRIVE
CITY-ST-ZIP	Coopercity, FL 33026
TITLE	V. PRESIDENT <input type="checkbox"/> DELETE
NAME	ELLIOT GREENBERG
STREET ADDRESS	47-A SINTSINK DR. W.
CITY-ST-ZIP	PORT WASHINGTON, N.Y 11050
TITLE	SECRETRES <input type="checkbox"/> DELETE
NAME	DAVID GREENBERG
STREET ADDRESS	4631 MERIDIAN AVE
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 of this report, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE: **4/30/99** 305-698-6760

CR2E034 (11/98)