

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000103380

FILED
Apr 29, 2008
Secretary of State

Entity Name: LARGE APPAREL OF FLORIDA, INC.

Current Principal Place of Business:

100 METRO WAY
SECAUCUS, NJ 07094

New Principal Place of Business:

Current Mailing Address:

100 METRO WAY
SECAUCUS, NJ 07094

New Mailing Address:

FEI Number: 22-3622209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CFOV () Delete
Name: BRITT, ANITA
Address: 100 METRO WAY
City-St-Zip: SECAUCUS, NJ 07094

Title: CEO () Delete
Name: SHAPIRO, ETHAN
Address: 100 METRO WAY
City-St-Zip: SECAUCUS, NJ 07094

Title: TVP () Delete
Name: ABATE, MICHAEL A
Address: 100 METRO WAY
City-St-Zip: SECAUCUS, NJ 07094

Title: D () Delete
Name: PHOENIX, WILLIAM
Address: 100 METRO WAY
City-St-Zip: SECAUCUS, NJ 07094

Title: D () Delete
Name: THOMPSON, DARRYL
Address: 100 METRO WAY
City-St-Zip: SECAUCUS, NJ 07094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL A. ABATE

TVP

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date