


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 27, 1999 8:00 am
Secretary of State

07-27-1999 90024 010 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000106309 ✓ 1. Corporation Name ATLANTIC LINGERIE AND PANTYHOSE OUTLET, INC.					
Principal Place of Business 2041 NW 23RD AVENUE MIAMI FL 33142			Mailing Address 2041 NW 23RD AVENUE MIAMI FL 33142		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country			2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		
9. Name and Address of Current Registered Agent LERMAN, CARLOS D ESQ. 100 SE 2ND STREET SUITE 2620 MIAMI FL 33131			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE <input type="checkbox"/> DELETE NAME D MILNER, RITA STREET ADDRESS 2041 NW 23RD AVENUE CITY-ST-ZIP MIAMI FL 33142			1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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 if changed, or on an attachment with an address.					
SIGNATURE: <u>Rita Milner</u> RITA Milner 7/16/99 (305) 634-8137 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/23/1998	
4. FEI Number 65-0893679	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

CR2E034 (5/99)

Atlantic Lingerie & Pantyhose Outlet, Inc.

Distributors of Hedys Pantyhose, Swimwear & Lingerie

596523-90024-10
P98000106309

2041 N.W. 23rd Avenue
Miami, Florida 33142

Phone: 305-634-8137
Fax: 305-634-8140

July 19, 1999

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: ATLANTIC LINGERIE AND PANTYHOUSE
OUTLET, INC.

Document P98000106309

FEI 65-0893679

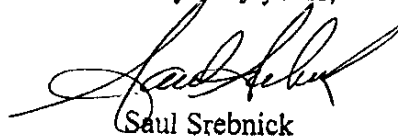
Dear Sir/Madam:

Enclosed please find the 1991 Profit Corporation Annual Report together with a check in the amount of \$150.00. Pursuant to my telephone conversation with your office, please be advised that this corporation was formed on December 23, 1998. Several weeks ago I received a document titled "Second Notice" 1999 Profit Corporation Annual Report requiring a filing fee of \$550.00. This is the first report which I received requesting a filing fee for the corporation for the year 1999. Possibly since the corporation was not filed until the very end of 1998, and the first notice was not forwarded to me. In any event, I did not receive any such first notice.

A representative of your office suggested that I complete the Report, forward a payment of \$150.00 and provide correspondence explaining the circumstances and confirming that a first notice was not received. Thereafter, your office would consider my request that the \$150.00 filing fee be accepted for the year 1999.

If you have any questions concerning this, please do not hesitate to contact the undersigned.

Very truly yours,



Saul Srebnick

SS/mo
Enclosures