2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P99000089473

1. Entity Name DEL MAR UNIFORMS AND APPAREL, INC.



FILED Mar 29, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1230 EAST 4TH AVENUE HIALEAH, FL 33010

PO BOX 821515

PEMBROKE PINES, FL 33082-1515



DO NOT WRITE IN THIS SPACE

03272006 No Cho-P CR2E034 (11/05) Applied For 4. FEI Number 65-0954246 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

accept

6. Name and Address of Current Registered Agent

MORLANNE, JESSE E 1230 EAST 4TH AVENUE HIALEAH, FL 33010

DO NOT WRITE IN THIS SPACE

| 8. The above the obligat | named entity submits this statement for the pations of registered agent. | ourpose of changing its reg | stered office or | registered agent, or t | ooth, in the State of Florida. I am familiar with, and | | |
|---|--|---|------------------------|------------------------------|--|--|--|
| SIGNATURE. | Signature, typed or printed name of registered agent and title | il applicable. (NOTE, Reg | istered Agent signatur | e required when reinstating) | DATE | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees | | | | | |
| 10. | 0. OFFICERS AND DIRECTORS | | | | | | |
| TITLE | PD | | | | | | |
| MAME | MORLANNE, CARMEN M | - | <u> </u> | | | | |
| STREET ADDRESS | 1230 EAST 4TH AVENUE | | ł | | | | |
| CITY-ST-ZIP | HIALEAH, FL 33010 | | 1 | | いのうつのかんかんづきを | | |
| THTLE | SD | | | | U00000484766 04/12/06-80056-018 150.00 | | |
| NAME | MORLANNE, JESSE E | | - 1 | | DAY 15100 00000 010 100.00 | | |
| STREET ADDRESS | 1230 EAST 4TH AVENUE | | i i | | | | |
| CITY-ST-ZIP | HIALEAH, FL 33010 | | | | | | |
| TITLE | VD | | | | | | |
| name | MORLANNE, ALEXANDER J | A. | | | | | |
| STREET ADDRESS | 1230 E 4TH AVE | | 1 | DO | O NOT WRITE | | |
| CITY-ST-ZIP | HIALEAH, FL 33010 | <u> </u> | | DC | N THIS SPACE | | |
| TITLE | VD | | 1 | IAI | | | |
| NAME | MORLANNE, JENNIFER C | | 1 | 117 | | | |
| STREET ADDRESS | 1230 E 4TH AVE | | 1 | | | | |
| CITY-ST-ZIP | HIALEAH, FL 33010 | | 1 | | | | |
| TITLE | | | | | | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report of supplemental 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 10 or Block 11 changed, or on an attachinent with an address with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS City-St-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

JESSE E. MURLAPHE 19/06 954 680 5776