FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90288 022 ***150.00

 Corpore tion 		7				
CLOTHE	SCARE, INC.				6:6t) arais 6:6t) A	1611 B1611 1861
Principal P ace	of Rusiness	Mailing Address			H BARN BARN GARN B	
1724 N 3RD ST		1724 N 3RD ST.				
11-11-11-11-11-11-11-11-11-11-11-11-11-		JACKSONVILLE FL 32250				
				DO NOT WRITE IN TH	IS SPACE	
				3. Date Incorporated or Qualifed		
5 District Di	and of Business	2a. Mailing Address		06/17/1991 4. FEI Number	Ani	plied For
2. Principal Place of Business		26. Walling Address		59-3073186		Applicable
Suite, Apt.		Suite, Apt. #, etc.			\$8.75 A	$\overline{}$
22		27		5. Certificate of Status Desired	Fee Re	
City & State	9	City & State		6. Electic n Campaign Financing	\$5.00	vlay Be
23		28		Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country	8. This corporation owes the current year		
24	25	29	30	Personal Property Tax.		□No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Register	o Ayent	
PATE	EL, SUBODH K.		T (Valle			
	N 3RD ST.		82 Street Add	ress (P.O. Bok Number is Not Acceptable)		
	(SONVILLE FL 32250		83		-	
			84 City	F	. 85 Zip C	ode
11. Pursuant t	to the provisions of Sections 607.05	50 2 and 607.1508, Florida Statu	tes, the above-named corp	poration submits this statement for the purpose	of changing its	registered
office or re	egistered agent, or both, in the State	e of Florida. Such change was a	authorized by the corporati	ion's board of directors. I hereby accept the ap	pointment as reg	tisterea
anent Lai	m familiar with, and accept the oblig	a ions of Section 607.0505. For	orida Statutes.	, , ,		.,
agent. I ai	m familiar with, and accept the oblig	ga ions of, Section 607.0505, Fo	orida Statutes.	, , , ,		,
agent. I ai SIGNATURE	m familiar with, and accept the oblig Signature, typed or printed in time of registered ag	garions of, Section 607.0505, Figure 1 and title if applicable. (NO T	erida Statutes, E: Registered Agent signature recuire	ed when reinstating) DATE		
agent. I al	m familiar with, and accept the oblig Signature, typed or printed in time of registered ag OFFICERS A	ga ions of, Section 607.0505, Figure 1 and title if applicable. (NO END DIRECTORS	E: Registered Agent signature recuire		AND DIRECTO	RS IN 12
agent. I at SIGNATURE 12. TITLE	Signature, typed or printed in time of registered ag OFFICERS A	garions of, Section 607.0505, Figure 1 and title if applicable. (NO T	E: Registered Agent signature recuired 13. 1.1 TITLE	ed when reinstating) DATE		
agent. I ai SIGNATURE 12. TITLE NAME	Signature, typed or printed in time of registered ag OFFICERS A D PATEL, SUBODH K.	ga ions of, Section 607.0505, Figure 1 and title if applicable. (NO END DIRECTORS	E: Registered Agent signature recuire 13. 1.1 TITLE 1.2 NAME	ed when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	ga ions of, Section 607.0505, Figure 1 and title if applicable. (NO END DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ed when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed in time of registered ag OFFICERS A D PATEL, SUBODH K.	gar t and title if applicable. (NO TO DIRECTORS	Title 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ed when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	ga ions of, Section 607.0505, Figure 1 and title if applicable. (NO END DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ed when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar t and title if applicable. (NO TO DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ed when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar t and title if applicable. (NO TO DIRECTORS	Trible Statutes. E: Registered Agent signature recuire 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ed when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar t and title if applicable. (NO TO DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ed when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar ions of, Section 607.0505, Figure 1 and title if applicable. (NO TO DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ed when reinstating) DATE	AND DIRECTO Change Change	RS IN 12 Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar ions of, Section 607.0505, Figure 1 and title if applicable. (NO TO DIRECTORS DELETE	Title 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ed when reinstating) DATE	AND DIRECTO Change Change	RS IN 12 Addition
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar ions of, Section 607.0505, Figure 1 and title if applicable. (NO TO DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	ed when reinstating) DATE	AND DIRECTO Change Change	RS IN 12 Addition Addition
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar ions of, Section 607.0505, Figure 1 and title if applicable. (NO TO DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	ed when reinstating) DATE	AND DIRECTO Change Change	RS IN 12 Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar ions of, Section 607.0505, Figure 1 and title if applicable. (NO Text	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ed when reinstating) DATE	AND DIRECTO Change Change	RS IN 12 Addition Addition
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar ions of, Section 607.0505, Figure 1 and title if applicable. (NO Text	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ed when reinstating) DATE	AND DIRECTO Change Change	RS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar tons of, Section 607.0505, Figure 1 and title if applicable. (NO Technology I and title if applicable. (NO Technology I DELETE	### 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ed when reinstating) DATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar ions of, Section 607.0505, Figure 1 and title if applicable. (NO Text	### 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 TITLE	ed when reinstating) DATE	AND DIRECTO Change Change	RS IN 12 Addition Addition
agent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar tons of, Section 607.0505, Figure 1 and title if applicable. (NO Technology I and title if applicable. (NO Technology I DELETE	### 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ed when reinstating) DATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS SITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar tons of, Section 607.0505, Figure 1 and title if applicable. (NO Technology I and title if applicable. (NO Technology I DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ed when reinstating) DATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	DELETE DELETE	### 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.5 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 STREET ADDRESS 5.6 CITY-ST-ZIP	ed when reinstating) DATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	gar tons of, Section 607.0505, Figure 1 and title if applicable. (NO Technology I and title if applicable. (NO Technology I DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ed when reinstating) DATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed in time of registered as OFFICERS A D PATEL, SUBODH K. 1724 N 3RD ST.	DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.5 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ed when reinstating) DATE	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition

14. I here by certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.C7(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 office 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 change d, or on an attachment with an address, with all other like empowered.

SIGNATURE: