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

**FILED PROFIT** May 29 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State **19**98 DIVISION OF CORPORATIONS DOCUMENT # (1) WORLD OF DENIM, INC. Principal Place of Business Mailing Address 7509 EXCHANGE DRIVE 7509 EXCHANGE DRIVE ORLANDO FL 32809-6928 ORLANDO FL 32809-6928 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/21/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3111565 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Flection Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes [] No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GABRIELSON, SCOTT Name HARBE 225 E. ROBINSON STREET 62 Street Address (P.O. Box Number is Not Acceptable) **SUITE 600** ROBINSON 83 ORLANDO FL 32801 84 City Zip Code 32801 11. Pursuant to the previsions of Florida Sidutes, the above named corporation submits this statement for the purpose of changing its registered change was authorized by the corporation's board of directors. I hereby accept the appointment as registered 60, 5005, Florida Statutes SIGNATURE (NOTE: Hog stored Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OELE TE TITLE 1.1 TITLE Change ☐ Addition STEINFELD, DAVID NAME 1.2 NAME 7509 EXCHANGE DRIVE STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY - ST - 7IP TITLE DELETE 2.1 TITLE Change Addition NAME STEINFELD, VERA 22 NAME 7509 EXCHANGE DRIVE STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 2. 4 CITY-S1-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-7IP DELETE TITLE 4.1 THLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHTY - ST - 7(P TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME

14. Thereby certify that the information samples 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 animal report or supplies Author and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the companion of the accurate properties of the companion of the accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the companion of the accurate properties of the companion of the accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the companion of the accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the companion of the accurate properties of the accurate pro

6.3 STREET ADDRESS

6.4 CITY-S1-7IP

STREET ADDRESS

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