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

FILED **PROFIT** Mar 02 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # A.R.E. T-SHIRTS & TOWELS, INCORPORATED Principal Place of Business Mailing Address 7280 W 2 WAY 7280 W 2 WAY HIALEAH FL 33014 HIALEAH FL 33014 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 03/11/1992 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number W2 384F1 ZO COURT W2 884F1 65-0323040 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing MIRAMAR 23 MIRAMAR 28 Trust Fund Contribution Added to Fees Country A. 2. U Country Zio 8. This corporation owes or has paid the current year intangible 24 3302 9 N. 2. V 33059 Yes 25 30 Personal Property Tax due June 30. □ No 28 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Mohammed EDHI, MOHAMMED ASIF EDHE 7280 WEST, 2 WAY Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33014 84 Zip Code 3302 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE VICE PRESIDENT Change Addition 1.1 TITLE TITLE ABBUL RAUF EDHI 17488 SW 20 COURT MIRAMAR FL 3302 **EDHI. MOHAMMED A** NAME 1.2 NAME 7280 WEST, 2 WAY STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZiP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 T TLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TOLE Change 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP TITLE DELETE Change Addition 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change

14. Thereby 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 chapped, or on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

SIGNATURE:

TITLE

STREET ADDRESS

CITY-ST-ZIP

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Addition