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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V31789

(3)

ZAMBRANO, NATALIA 2098 NW 20 ST

MIAMI FL 33142

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FILED
Apr 08 1997 8:00am
Secretary of State

CLOTHING GALLERY, INC.				
Principal Place of Business	Mailing Address		DIBI BIRICALDI DIBIL DIBIL IDEL	
2199 NW 20TH ST #5 MIAMI FL 33142	2098 NW 20 ST #10 Miami Fl 33142-7304			
US		3. Date Incorporated or Qualified 04/24/1992	a. Date of Last Report 04/25/1996	
2. Principal Place of Business 21 7951 SW 40 th ST	20. Mailing Address 26 7951 SW 40 57	4, FEI Number 65-0329786	Applied For Not Applicable	
Suite Apt. #, etc 22 206	Suite, Apt. #, etc. 27 206	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 MIAMI M	City & State 28 MBM M	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 33/JT Country 25 VS	29 33/55 30 US	This corporation has liability for inten- Florida Statutes		
g. Name and Address of Co	Irrent Registered Agent	10. Name and Address of New Registe	ered Agent	

Zio Code 33/40 Berch 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

81 Name

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84 City

Street Address (P.O. Box Number is Not Acceptable)
5401 COLLINS AUL

agent. Fam familiar with, and accept the obligations of, Section 607.0505, Horida Statutes.						
SIGNATURE Signature: typed or proted name of registered agent and fole if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1 ILF	PD DE	LETE	1.1 TITLE	Change Addition		
NAME	ZAMBRANO, STANLEY M.		1.2 NAME			
STREET ADDRESS	2098 NW 20 ST #10		1.3 STREET ADDRESS			
CHY-S1-20P	MIAMI FL 33142		1.4 CITY-\$T-ZIP			
TITLE	DP DE	LETE	2.1 TITLE	Change Addition		
NAME	ZAMBRANO, NATALLIA		2.2 NAME			
STREET ADDRESS	2199 NW 20TH ST #5		2.3 STREET ADDRESS			
CHY ST-ZIF	MIAMI FL		2.4 CITY - ST - ZIP			
THLE		LETE	3.1 TITLE	Change Addition		
NAM?			3.2 NAME			
STREET AUDRESS			3.3 STREET ADDRESS			
CHY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE	DE	ELETE	4.1 TITLE	☐ Change ☐ Addition		
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CHY-ST-ZIP	_		4.4 CITY-ST-ZIP			
THE		ELETE	5.1 TITLE	Change Addition		
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CIRY-ST-7IP			5.4 CITY-ST-ZIP			
TULE	DE	LETE	6.1 TITLE	Change Addition		
NAME			6.2 NAME			
STREET ADDRESS		ľ	6.3 STREET ADDRESS			
CITY+S1-ZIP			6.4 CITY+ST-ZIP			

I do 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, 13 on an attachment with an address.

SIGNATURE:

MEQUIRED

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