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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DiVISION OF CORPORATIONS

**DOCUMENT # V36273** 

(3)

|  | OVER BEACHWEAR, INC.   |   |                                 |                       | <del> ir </del> |  |  |  |
|--|--|---|---------------------------------|-----------------------|-----------------|--|--|--|
| Principal Place of Business Mailing Address  517 NE 2ND AVENUE 517 NE 2ND AVENUE  HALLANDALE BEACH FL 33009 HALLANDALE BEACH FL 33 |  |   |                                 | 009-2419              |                 | , 1524 SINCE INC. SINCE 11511 4505 AND SINCE SAME SINCE SINCE SAME SINCE SAME SAME SAME SAME SAME SAME SAME SAM  |  |  |
|  |  |   |                                 |                       |                 | 3. Date Incorporated or Qualified 05/13/1992   | 3a. Date of Last Report 04/15/1996     |  |
| 2. Principal Pt  | ace of Business  | 2a. Mailing Address   |                                 |                       | <del></del>     | 4. FEI Number  | Applied For                            |  |
| 21   |  | 26  |                                 |                       |                 | 65-0332542   | Not Applicable                         |  |
| Suite, Apt   | #, etc   | Suite, Apt. #, etc.   |                                 |                       |                 | 5. Certificate of Status Desired   | \$8.75 Additional                      |  |
| 22   |  | City P State  |                                 |                       |                 |  | Fee Required                           |  |
| City & State   | <i>!</i>   | City & State  |                                 |                       |                 | Election Campaign Financing     Trust Fund Contribution  | \$5.00 May Be Added to Fees            |  |
| 23  <br>Zip  | Country  | Zip   | С                               | ountry                |                 | 8. This corporation has liability for  |  |  |
| 24   | 25   | 29  | 30                              |                       |                 | Florida Statutes   | Yes No                                 |  |
|  | 9. Name and Address of Curr  | ent Registered Agent  |                                 |                       |                 | 10. Name and Address of New R  | egistered Agent                        |  |
| STEN   | vteld, steve   |   |                                 | 81                    | Name            |  |  |  |
| 1304 SW 160TH AVENUE   |  |   |                                 | 82                    | Street Add      | dress (P.O. Box Number is Not Acceptable)  |  |  |
| STE  |  |   |                                 |                       |                 |  |  |  |
| FT.LA  | NUDERDALE FL 33326   |   |                                 | 83                    |                 |  |  |  |
|  |  |   |                                 | 84                    | City            | A CONTRACTOR OF THE CONTRACTOR | FL 85 Zip Code                         |  |
| office or re   | to the provisions of Sections, 607 0, egistered agent, or both, in the Stam familiar with, and accept the oblination. Typed is provided accept the oblination. | ate of Florida Such change v<br>ligations of, Section 607.050 | was authori<br>5. Florida S     | zed by<br>Statutes    | the corpora     | rporation submits this statement for the<br>ation's board of directors. I hereby accu-<br>ulred when reinstating)  | DATE                                   |  |
| 12.  | OFFICERS A   | AND DIRECTORS   | 1                               | 3.                    |                 | ADDITIONS/CHANGES TO OFF   |  |  |
| 11TLF  | P ATTENDED   | DELETE  |                                 | 1 TITLE               | - 1             |  | Change Addition                        |  |
| NAME   | STEINFELD, STEVE   | •   | i                               | 2 NAME                |                 |  |  |  |
| STREET ADDRESS   | 1304 S.W. 160TH AVE. #220<br>FT. LAUDERDALE FL 33326   | !   |                                 |                       | ADDRESS         |  |  |  |
| CHY-S1-Zir<br>Tille  | TI. LAUDENDALE PL 33320  | DELET   |                                 | 4 CITY-ST<br>1 TITLE  | T- ZIP          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | Change Addition                        |  |
| NAM:   |  |   |                                 | 2 NAME                |                 |  |  |  |
| STREET ADDRESS   |  |   |                                 |                       | ADDRESS         |  | <del>;</del>                           |  |
| City St-Zip  |  |   | 1                               | 4 CITY-S              |                 | 4 · 1  |  |  |
| TITLE  |  | DELETI  | E 3.                            | 1 TITLE               |                 |  | Change Addition                        |  |
| NAME:  |  |   | 3.                              | 2 NAME                |                 |  |  |  |
| STREET ADDRESS   |  |   | 3.                              | 3 STREET              | ADDRESS         |  |  |  |
| CHY SI 7IF   |  | DECET   |                                 | 4. CITY - S           | ST-ZIP          |  | Change Addition                        |  |
| TITLE  |  | ☐ DELETI  |                                 | 1 TITLE               |                 |  | Change L Addition                      |  |
| NAME   |  |   |                                 | 2 NAME                | IDDDCCC         |  |  |  |
| STREET ADDRESS<br>Cary Starte  |  |   |                                 | a sineei<br>4 city-si | ADDRESS         |  |  |  |
| 11"[[  |  | ☐ DELETI  |                                 | 1 TITLE               | 1-417           |  | Change Addition                        |  |
| MAME   |  |   | <b>5</b> .                      | 2 NAME                | .               | *  |  |  |
| STREET ADDRESS   |  | •   | 5.                              | 3 STREET              | ADDRESS         |  |  |  |
| : CIDY - ST - ZIP  |  |   | 5.                              | 4 CITY-S              | T-ZIP           |  |  |  |
| II. Ft   |  | DELET   | E 6.                            | 1 TITLE               |                 |  | ☐ Change ☐ Addition                    |  |
| NAME   |  |   | 6.                              | 2 NAME                |                 |  |  |  |
| STEEL: ADDRESS   |  |   | 6.                              | 3 STREET              | ADDRESS         |  |  |  |
| City-St-ZiP  | and an an all and a second   | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -                       | 6.                              | 4 CITY - S            | T-ZIP           | ad in Contine 110 p7(0)(3) Finish Cont   | ton I further cortifu that the         |  |
| informatio   | by decary that the information suppling indicated on this annual report ${f c}$  | med with this illing does not<br>or supplemental annual repo  | quality for t<br>ort is true an | id accu               | rate and th     | ed in Section 119.07(3)(i). Florida Statu<br>lat my signature shall have the same leg  | gal effect as if made under oath; that |  |

Stewe Steinfeld