

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 324141

Entity Name: TEAM EDITION APPAREL, INC.**Current Principal Place of Business:**4208 19TH STREET COURT, EAST
BRADENTON, FL 34208-9210**Current Mailing Address:**4208 19TH STREET COURT, EAST
BRADENTON, FL 34208-9210**FEI Number:** 59-1202727**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title S
Name CLARKE, SHEILAGH M
Address 330 WEST 34TH ST
City-State-Zip: NEW YORK NY 10001

Title VTD
Name MAURER, JOHN A
Address 330 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title VP, ASST. TREASURER
Name NOWAK, JEREMY
Address 330 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title ASST. TREASURER
Name PAUL, OLSON
Address 330 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title VP
Name CIPRIANO, GIOVANNA
Address 330 WEST 34TH ST.
City-State-Zip: NEW YORK NY 10001

Title VPD
Name PETERS, LAUREN
Address 330 WEST 34TH ST
City-State-Zip: NEW YORK NY 10001

Title ASST. SECRETARY
Name SPIEGEL, STEVEN
Address 330 WEST 34TH STREET
City-State-Zip: NEW YORK, NY 10001

Title VP
Name EBERHART, CAI
Address 330 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHEILAGH M. CLARKE**SECRETARY****01/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title EXECUTIVE VICE PRESIDENT
Name PETERS, LAUREN
Address 330 WEST 34TH STREET
City-State-Zip: NEW YORK NY 10001

Title ASST. TREASURER
Name FENNER, TATE
Address 3543 SIMPSON FERRY ROAD
City-State-Zip: CAMP HILL PA 17011