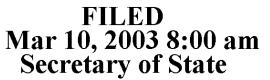
## 2003 FOR-PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 501460



	DE GOWN SHOP, INC.			03-10-2003 90741 039 *	***150.00
Principal Place of Business 9965 SAN JOSE BLVD. JACKSONVILLE FL 32257 US		Mailing Address 9965 SAN JOSE BLVD. JACKSONVILLE FL 32257 US			ATAH KÉRNI DIDIN ATAH ATAH
2. Principal	Place of Business	3. Mailing Address			
Suite, Apt. #, etc.  City & State		Suite, Apt. #, etc.  City & State		☐ CHECK HERE IF MAKING CHANGES	
				4. FEI Number 59-1664660	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired 58	:75 Additional -
	6. Name and Address of Curre	ent Registered Agent		7. Name and Address of New Registered Age	nt
	A		Name		
•	Shirley N Jose Blvd.		Street Addre	(P.O. Box Number is Not Acceptable)	
JACKSO	NVILLE FL 32257				
			City	<b>P</b> 1	Zip Code
			'	FL stered agent, or both, in the State of Florida. I am famil	·
SIGNATURE	tions of registered agent.  Signature, typed or printed name of registered ag				
		ent and title if applicable. (NOT	FE: Registered Agent signature requ	uired when reinstating) DATE	<del></del>
	FILE NOW!!! FEE IS \$150.00 r-May:1;:2003;Fee-will be \$550.0 k Payable to Florida Department	00	TE: Registered Agent signature req	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be
	FILE NOW!!! FEE IS \$150.00 r-May-1;2003;Fee will be \$550.0 k Payable to Florida Department OFFICERS AF	00	TE: Registered Agent signature required agent	9. Election Campaign Financing  Trust Fund Contribution.	Added to Fees
Make Check	FILE NOW!!! FEE IS \$150.00 r-May:1;:2003:Fee-will be \$550.0 k Payable to Florida Department	of State		9. Election Campaign Financing Trust Fund Contribution.	Added to Fees
Make Check  10.  TITLE  NAME  STREET ADDRESS	FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.0 k Payable to Florida Department OFFICERS AT PD COHEN, SHIRLEY 9965 SAN JOSE BLVD.	t of State	11. TITLE NAME STREET ADDRESS	9. Election Campaign Financing  Trust Fund Contribution.   ADDITIONS/CHANGES TO OFFICERS AND DIF	Added to Fees
Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD COHEN, SHIRLEY 9965 SAN JOSE BLVD. DS COHEN, PERRY 9965 SAN JOSE BLVD. JACKSONVILLE FL DS COHEN, PERRY 9965 SAN JOSE BLVD.	t of State	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	9. Election Campaign Financing Trust Fund Contribution.	Added to Fees RECTORS IN 11 Change
Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	PD COHEN, SHIRLEY 9965 SAN JOSE BLVD. DS COHEN, PERRY 9965 SAN JOSE BLVD. JACKSONVILLE FL DS COHEN, PERRY 9965 SAN JOSE BLVD.	t of State  ND DIRECTORS  Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME , STREET ADDRESS	9. Election Campaign Financing  Trust Fund Contribution.	Added to Fees  RECTORS IN 11  Change Addition  Change Addition
Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD COHEN, SHIRLEY 9965 SAN JOSE BLVD. DS COHEN, PERRY 9965 SAN JOSE BLVD. JACKSONVILLE FL DS COHEN, PERRY 9965 SAN JOSE BLVD.	oo t of State  ND DIRECTORS  Delete  Delete	11.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS	9. Election Campaign Financing Trust Fund Contribution.	Added to Fees  RECTORS IN 11  Change Addition  Change Addition  Change Addition

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

JIRPERRY C. COHEN 3/8/03 904886-0700