

2002 UNIFORM BUSINESS REPORT (UBR)

V-BOOK AD

DOCUMENT # 578429

FILED

02 OCT 15 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

FASH-EN-HUES, INC.

Principal Place of Business

118 BRIDGE ST.
PIQUA OH 45356

Mailing Address

118 BRIDGE ST.
PIQUA OH 45356

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2239105

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REGO, ANTHONY
7108 NW 66 ST
TAMARAC FL 33321

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	REGO, ANTHONY	
STREET ADDRESS	710 CALDWELL ST.	
CITY-ST-ZIP	PIQUA OH	
TITLE	SD	<input type="checkbox"/> Delete
NAME	REGO, DOROTHY	
STREET ADDRESS	710 CALDWELL ST.	
CITY-ST-ZIP	PIQUA OH	
TITLE	V	<input type="checkbox"/> Delete
NAME	REGO, JAMES	
STREET ADDRESS	254 HARDIN ROAD	
CITY-ST-ZIP	PIQUA OH	
TITLE	T	<input type="checkbox"/> Delete
NAME	REGO, VICTORIA	
STREET ADDRESS	710 CALDWELL STREET	
CITY-ST-ZIP	PIQUA OH 45356	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

900008449529
10/18/02--01053--013 **750.00

CR2E034 (4/02)

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Signature of Dorothy Rego
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/25/02 937 778 8500
Date Daytime Phone #