

2001 UNIFORM BUSINESS REPORT (UBR)

3/5/0

FILED
Aug 22, 2001 8:00 am
Secretary of State

03-05-2001 90062 001 ***150.00

DOCUMENT # L39050

1. Entity Name
CHIC LEATHER, INC.

LX

Principal Place of Business
1204 S MILITARY TRAIL
3406
DEERFIELD BEACH FL 33442
US

Mailing Address
1204 S MILITARY TRAIL
3406
DEERFIELD BEACH FL 33442
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
9045 La Fontana Blvd
 Suite, Apt. #, etc.
B-20

3. Mailing Address
POB 970637
 Suite, Apt. #, etc.

City & State
Boca Raton FL

City & State
Boca Raton FL

4. FEI Number **65-0166768** Applied For
 Not Applicable

Zip **FL 33434** Country **USA**

Zip **33497-0637** Country **USA**

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
FRIED, IRVING
1204 S MILITARY TRAIL #3406
DEERFIELD BEACH FL 33442

7. Name and Address of New Registered Agent
 Name **SIDNEY M SCHUCHMAN CPA**
 Street Address (P.O. Box Number Not Acceptable)
9045 LA FONTANA BLVD B-20
 City **Boca Raton FL** Zip Code **33434**

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.

SIGNATURE DATE **8/13/01**

Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when remaining)

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
D	FRIED, IRVING	1204 S MILITARY TRAIL #3406	DEERFIELD BEACH FL 33442	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	IRVING FRIED	100 CENTRE STREET #209	BROOKLINE, MA 02146	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: **IRVING FRIED** DATE **8-13-01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2001 UNIFORM BUSINESS REPORT (UBR)

0106087 AT

DOCUMENT # L39050
 1. Entity Name
CHIC LEATHER, INC.

Attachment 77724
Doc # [REDACTED]

Principal Place of Business
1204 S MILITARY TRAIL
3406
DEERFIELD BEACH FL 33442
US

Mailing Address
1204 S MILITARY TRAIL
3406
DEERFIELD BEACH FL 33442
US

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

4. FEI Number **65-0166768** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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6. Name and Address of Current Registered Agent
FRIED, IRVING
1204 S MILITARY TRAIL #3406
DEERFIELD BEACH FL 33442

7. Name and Address of New Registered Agent
 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.
 SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 12, 2001 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIED, IRVING 1204 S MILITARY TRAIL #3406 DEERFIELD BEACH FL 33442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

Attachment Doc # 1 390512 - [Redacted] 777284

CHIC LEATHER INC 08/99
8587 MOONLIT DRIVE
DELRAY BEACH, FL 33446

C0029150 1010

DATE 2/18/2001

63-986/631-475

ORDER OF DEPOSIT \$150.00

One Hundred Fifty

Republic Bank KING'S POINT OFFICE
1850 W. ATLANTIC AVE.
DELRAY BEACH, FL 33446

⑆00000815000⑆

ENDORSE HERE:
DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT # 1009068796
MAR 02 2001
DO NOT SIGN / WRITE / STAMP BELOW THIS LINE
FOR FINANCIAL INSTITUTION USAGE ONLY
BANK OF AMERICA, N.A.
105-501
0630000199
3101058850 03-07
3101058850 0605

FEDERAL RESERVE BANK REGULATION CC
Security Features on this document include a Micro-Print
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