

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003 8:00 am
Secretary of State

01-10-2003 90027 021 ***150.00

DOCUMENT # **P97000101273**

1. Entity Name
FIRST FASHION U.S.A., INC.



Principal Place of Business
**2542 N STATE RD 7
HOLLYWOOD FL 33021
US**

Mailing Address
**11099 HELENA DRIVE, EMBASSY LAKES
COOPER CITY FL 33026**

60005104



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

5450 S. STATE Rd 7

Suite, Apt. #, etc.

Suite 14

3. Mailing Address

Suite, Apt. #, etc.

City & State
Port Lauderdale, FL

City & State

4. FEI Number **65-0797398**

Applied For

Not Applicable

Zip
33314-6442

Country
U.S.A

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, EDWARD S JR.
11099 HELENA DRIVE, EMBASSY LAKES
COOPER CITY FL 33026**

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, EDWARD S JR. 11099 HELENA DRIVE, EMBASSY LAKES COOPER CITY FL 33026	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIENDLY, LEE TANG 1-A1D, SA1 YEUNG CHO1 STREET, MONGKOK KOWLON, HONG KONG	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAI YING LEUNG, WAN WENDY 1A-1K, SAI YEUNG CHO1 STREET, MONGKOK KOWLON, HONG KONG	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Edward S. Smith** **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-03 954-292-0436

Date

Daytime Phone #

CR2E034 (10/02)