2002 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the receiver or trustee empowered to changed, or on an attachment with an address, with all of

SIGNATURE:

Jan 16, 2002 8:00 am Secretary of State **DOCUMENT #** 304653 1. Entity Name 01-16-2002 90075 011 ***150.00 RENEE'S HOUSE OF FASHIONS INC. Principal Place of Business Mailing Address 311 JOHN RIGLING BLVD. 311 JOHN RINGLING BLVD SARASOTA FL 34236 SARASOTA FL 34236 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1119579 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MEYER. EDWARD C II Street Address (P.O. Box Number is Not Acceptable) 311 JOHN RINGLING BLVD. SARASOTA FL 33577 City 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 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE Change ☐ Addition NAME Meyer, Edward C II NAME STREET ADDRESS 311 John Ringling BLVD STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP ☐ Addition TITLE TITLE Change Delete NAME NAME MEYER, SUSAN STREET ADDRESS 311 John Ringling BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Sarasota Fl ☐ Delete TITLE TITLE Change ☐ Addition NAME MEYER, EDWARD C II NAME STREET ADDRESS STREET ADDRESS 311 John Ringling BLVD CITY-ST-ZIP Sarasota Fl CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 accurate an equired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

FILED