2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

468182 DOCUMENT

1. Entity Name

NORMA FASHIONS, INC.

Principal Place of Business



FILED Jan 16, 2003 8:00 am Secretary of State 01-16-2003 90117 018 ***150.00

2735 NW 21: MIAMI FL 33 US		2735 NW 215' MIAMI FL 331: US	42					
Suite, Apt. #, etc. Suite, Apt. #, etc.						☐ CHECK HERE IF MAKING CHANGES		
City & Sta	ate	City & State	City & State			4. FEI Number 59-1575731 Applied For Not Applicable		
Zip	Country	Zip	Cor	untry	- ~~~ · 5	Certificate of Status Desired	\$8.75 Fee Re	5_Additional
	6. Name and Address of Curre	nt Registered Agen			7.	Name and Address of New R		•••
BRAFMAN, LUIS 2735 NW 21ST STREET MIAMI FL 33142				Name Street Address (P.O. Box Number is Not Acceptable)				
				City	·•.	, , , , , , , , , , , , , , , , , , , ,	FL Zip	Code
8. The above the obliga	e named entity submits this statement ations of registered agent.	for the purpose of cl	nanging its registe	ered office o	r registered ag	ent, or both, in the State of Flo		with, and accept
SIGNATURE	Signature: typed or printed name of registered age	ent and title if applicable.	(NOTE: Begiste	red Agent sions	ture required when re	Singulation	DATE	
F	FILE NOW!!! FEE IS \$150.00					·		· · · ·
Afte Make Chec	r May 1, 2003 Fee will be \$550.0 k Payable to Florida Department	of State				Selection Campaign Fin Trust Fund Contribution	~ _ ~	55.00 May Be added to Fees
10.		D DIRECTORS	11		AD	DITIONS/CHANGES TO OFF	ICERS AND DIREC	TORS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	VTD BRAFMAN, LUIS 3181 N. 35 ST HOLLYWOOD FL						☐ Cha	
TITLE NAME STREET ADDRESS. CITY-ST-ZIP	D BRAFMAN, GERALDINE 3181-N-35-ST HOLLYWOOD FL		Delete TITI NAI STE	LE		· · · · · · · · · · · · · · · · · · ·	☐ Chai	nge Addition
TITLE NAME STREET ADDRESS	D MEYERS,OLGA 3553 N.E. 171 STREET		Pelete TITI	LE			Char	nge 🔲 Addition
CITY-ST-ZIP	NORTH MIAMI BEACH FL	33160		Y+ST-ZIP			e	
NAME STREET ADDRESS CITY-ST-ZIP	A STATE OF THE PARTY OF		NAM STR	ME FFT ADDRESS		E. 171 STREET		nge XXX Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		0	nan Stri		N. MIAMI	BEACH, FL. 3310	50 □ Chan	nge
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ D	NAM STRE	NE EET ADDRESS			Chan	ge Addition
i	ertify that the information supplied with	h this filing does not		-ST-ZIP	ed in Section 1	19.07/3Vi) Florida Statutos Li	further earlifuther t	

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 impowered 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 additional statutes.

SIGNATURE: