

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # 535031 1. Entity Name FASHION CONNECTION OF MIAMI, INC.	
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Principal Place of Business 900 WEST 19 STREET HIALEAH, FL 33010 US	Mailing Address 900 WEST 19 STREET HIALEAH, FL 33010 US
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01262006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1756390	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent URQUIZA, SERGIO 900 WEST 19 STREET HIALEAH, FL 33010

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IN THIS SPACE**

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	S
NAME	URQUIZA, MARIA
STREET ADDRESS	1704 SW 104 CT
CITY-ST-ZIP	MIAMI, FL
TITLE	VPO
NAME	URQUIZA, JOSEPH
STREET ADDRESS	1704 SW 104 CT
CITY-ST-ZIP	MIAMI, FL
TITLE	PO
NAME	URQUIZA, SERGIO JR
STREET ADDRESS	1704 SW 104 CT
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/19/06-80061-010 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Maria Urquiza 4/1/2006 (305) 862-078
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #