

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H73784

1. Entity Name

JUST SHIRTS, WESTLAND, INC.

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90178 007 ***150.00

Principal Place of Business

Mailing Address

% UNITED STATES CORPORATION COMPANY
 1620 GRAND AVE.
 BALDWIN NY 11510

% UNITED STATES CORPORATION COMPANY
 1620 GRAND AVE.
 BALDWIN NY 11510-1807

2. Principal Place of Business

71 CLINTON ROAD

3. Mailing Address

71 CLINTON ROAD

Suite, Apt. #, etc.

LOWER LEVEL

Suite, Apt. #, etc.

LOWER LEVEL

City & State

GARDEN CITY NEW YORK

City & State

GARDEN CITY NEW YORK

Zip

11530

Country

USA

Zip

11530

Country

USA

4. FEI Number

58-1697862

Applied For

Not Applicable

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

UNITED STATES CORPORATION COMPANY
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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 PD ☐ Delete
 NAME SIEGEL, WILLIAM, R
 STREET ADDRESS 1620 GRAND AVENUE
 CITY-ST-ZIP BALDWIN NY

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 71 CLINTON ROAD - LOWER LEVEL
 CITY-ST-ZIP GARDEN CITY NEW YORK 11530

TITLE SD ☐ Delete
 NAME LUBEL, ALICE
 STREET ADDRESS 8201 NW 12 CT
 CITY-ST-ZIP PLANTATION FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE AS ☐ Delete
 NAME DRUCKER, ANDREA
 STREET ADDRESS 3 COPPERBEECH PL
 CITY-ST-ZIP MERRICK NY

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME SUGARMAN, TAMMY
 STREET ADDRESS 7 NORTH CT
 CITY-ST-ZIP OYSTER BAY COVE NY

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 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: WILLIAM R. SIEGEL
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00
 Date

(76) 867-6200
 Daytime Phone #