## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## K24907 **DOCUMENT #**



## FILED Mar 17, 2003 8:00 am & Secretary of State

1. Entity Name MICA DESIGNS OF MIAMI, INC.					03-17-2003 90678 046 ***150.00		
Principal Place of Business C/O SHIRLEY A. DEUTCH 11500 SW 120TH STREET MIAMI FL 33176		Mailing Address C/O SHIRLEY A. DEUTCH 11500 SW 120TH STREET MIAMI FL 33176					
2. Principal Place of Business		3. Mailing Address			T TEGLORIL ENGLISHEN BARTA BARTA BONIY BORKY BARKA BIRDIY BIRDIY BERTU BIRDIY BERTU BIRDIY BERTU BIRDIY BERTU B		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 65-0051193 Applied For Not Applied be		
Zip Country		Zip	Country		5. Certificate of Status Desired See Required	1	
	6. Name and Address of Current	Registered Agent	<u> </u>	ļ	7. Name and Address of New Registered Agent	$\dashv$	
			~ Na			7	
DEUTCH, SHIRLEY A.				Kristopher K. Huber			
11500 SW 120TH STREET			511	Street Address (P.O. Box Number is Not Acceptable) 11500 SW 120th Street			
MIAMI FL	33176					7	
				h/	<b>₽1</b> Zin Codo	4	
				City Miami FL Zip Code 33176			
the obligation	e named entity submits this statement to tions of registered agent.  Signature, typed or printed name of registered agent.	Lul Kristo	opher K.		ed agent, or both, in the State of Florida. I am familiar with, and accept  - President 2/18/03  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 \$5.00 May Be Trust Fund Contribution. Added to Fees		
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
NAME STREET ADDRESS CITY-ST-ZIP	D DEUTCH, SHIRLEY A. 11500 SW 120TH STREET MIAMI FL	☑ Delete	TITLE NAME STREET ADD CITY-ST-ZI	DRESS   115			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST DEUTCH, SHIRLEY A. 11500 SW 120TH STREET MIAMI FL	⊠ Delete	TITLE NAME STREET ADD CITY-ST-ZI	Sh Sh: 1150	•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	PRESS	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	l l	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZII		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delste	: TITLE NAME STREET ADD CITY-ST-ZI		☐ Change ☐ Addition		

12. I hereby certify that the information supplied with this filling 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:

REKristopher K. Huber

2/18/03

Date

305-235-9322

Daytime Phone #