FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

FASHION ENTERPRISES CORP.

FILED										
Feb 23	1998	8:00am								
Secre	etary o	of State								



Principal Place	e of Business	Mailing A	ddress		-	•	-		1831 BIBN BIBN	1 8181): (82)
C/O ISAK KUBILIUM 2507/2509 N.W. 2ND AVE. MIAMI FL 33127		2507/250	C/O ISAK KUBILIUM 2507/2509 N.W. 2ND AVE. MIAMI FL 33127			DO NOT WRITE	IN THIS S	PACE		
							3. Date Incorporated or Qualified			
		·					10/04/1988			
-	ace of Business	<u> </u>	g Address				4. FEI Number		 `	oplied For
21 Cuite Apt	# ata	26	Apt. #, etc.				59-4348316		\$8.75	ot Applicable
Suite, Apt.		27					6. Certificate of Status Desired		Fee Re	peninpe
City & State	9	<u> </u>	State				6. Election Campaign Financing		\$5.00	May Be to Fees
23	Country	Zip	 -	Count	n.	 .	Trust Fund Contribution			
Zip	Country	 	ŀ	30	ı y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
24	25 9. Name and Address	29 of Current Registered		30			10. Name and Address of New Re			
VI B				8	1	Name			-	
Kubilium, Isak 2507/ 250 9 n.w. 2nd ave			8:	2	Street Addre	dress (P.O. Box Number is Not Acceptable)				
MLA	MI FL 33127			8	3					
				8	4	City		FL	85 Zip	Code
	- A C - 4 C	- 607 0500	O. Clasida Ctatuta				ration submits this statement for the p		changing if	e rogietorog
office or re	egistered agent, or both, in m familiar with, and accept	the State of Florida, Suc	:h change was a	authorized t	by 1	the corporation	on's board of directors. I hereby accep	t the appo	intment as	registered
SIGNATURE						,				<u>.</u>
	Signature, typed or printed name of r		ble. (NOTE		gent	t signature requirer	when reinstating)	DATE	DIDECTOR	20 IN 40
12.	PD OFFI	CERS AND DIRECTORS	☐ DELE TE	13.	:		ADDITIONS/CHANGES TO OFFIC	EUS VIAD	Change	Addition
TITLE	Kubilium, Isak		been	1.2 NAM				,	0/10/190	
NAME	2507/2509 N.W. 2ND	A\/E		1.3 STRE		DODECC				
STREET ADDRESS	MIAMI FL	ATE								
CITY-ST-ZIP TITLE	VD		DELETE	1.4 CITY- 2.1 TITLE		- ZIP			Change	Addition
NAME	KUBILIUM, ABRAHAN	ı	- OFFICE	2.2 NAME				•	_	
STREET ADDRESS	2507/2509 N.W. 2ND			2.3 STRE		DORESS				
CITY-ST-ZIP	MIAMI FL	,		2. 4 City						
TITLE	- Trail With 1 C		DELETE	3.1 TrTLE					Change	Addition
NAME				3.2 NAME	Ε					
STREET ADDRESS				3.3 STRE		DORESS				
CITY-ST-ZIP				3.4. CITY	'- ST-	- ZIP				
TITLE			DELETE	4.1 TITLE					Change	Addition
NAME				4. 2 NAM	ΙE	Ì	•			
STREET ADDRESS				4.3 STRE	ET A	DORESS				
CITY-ST-ZIP				4.4 CITY	- ST-	- ZIP				
TITLE			DELETE	5.1 TITLE					Change	Addition
NAME				5.2 NAME	Ē		•			
STREET ADDRESS				5.3 STRE	ET AI	DDRESS				
CITY-ST-ZIP			** 	5.4 CITY	_	- ZIP			-	
TITLE			DELETE	6.1 TITLE		+		Į	Change	Addition
NAME				6.2 NAME						
STREET ADDRESS				6.3 STRE]				
CITY-ST-ZIP				6.4 CITY	- \$1-	ZIP	testine 440 07(0)(i) Florido Castido I	further + +	tifu that the	Information
14. I hereby o	ertify that the information s	upplied with this filing of	ses not quality to	x the exem	iDIK	on stated in S	ection 119.07(3)(i), Florida Statutes. I	iui iner cer	ing trial the	monnation

indicated on this annual report or supplemental annual 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.