2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED May 05, 2003 8:00 am

DOCUMENT # L02000025651					Secretary of State 05-05-2003 92181 043 ****50.00			
ATLANTA	FASHION, LLC	المستولين في						
Principal Plac	ce of Business	Mailing Address			,			
777 NW 72ND AVE #1 BB-24 777 NW 72ND AVE #1 BB-24 MIAMI FL 33126 MIAMI FL 33126								
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2. Principal Place of Business 7 7 7 NW 73 AVE Suite, Apt. #, etc. 3. Mailing Address 7 7 7 NW 73 AVE Suite, Apt. #, etc.				-				
1 B B 8					M CHEC	K HERE IF MAKIN	IG CHANGES	
City & Stat	FL	City & State M A M	F.L.	*'	4. FEI Number 3 4	7 4 7	No	oplied For of Applicable
331 g	6 Country V S A	33126	Country A		5. Certificate of Status [\$5.00 Add Fee Require	
6. Name and Address of Current Registered Agent Name					7. Name and Address of New Registered Agent			
ABAD, LUIS								····
777 NW 72ND AVE., #1 BB-24				et Address (F	P.O. Box Number is Not Ac	ceptable)		
MIAMI FL 33126			77	7 mw	71 AVE	# 1 BB	8	
			City	MIA-	mj	F		°26
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered offic	e or registere	ed agent, or both, in the Si	ate of Florida. I an	n familiar with,	and accept
SIGNATURE	LVIS ABAD	2				4/3	0/03	-
7 mg - 1	Signature, typed or printed name of registered agent at		E: Registered Agent si		when reinstating)	OATE		
and the	and the second of the second o	FILE No	OW!!! FEE IS		t of State	م يمود	-	
			e By May 1, 2		it of State			
9.	MANAGING MEMBER		10.		ADI	ITIONS/CHANGE		
NAME .	MGRM	Delete	TITLE NAME				Change	☐ Addition
STREET ADDRESS	KHOURI, JOSEPH 777 NW 72ND AVE., #1 BB-24		STREET ADDRE	SS				1
CITY-ST-ZIP	MIAMI FL 33126		CITY-ST-ZIP				<u> </u>	
TITLE NAME	MGRM	☐ Delete	TITLE NAME		GRM.		Change	☐ Addition (
STREET ADDRESS	ABAD, LUIS 777 NW 72ND AVE #1BB-24		STREET ADORE	ማይጠ ፋፋፋ I	D, LVIS	#1 RR	C	1
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CITY-ST-ZIP				SS		···		
CITY-ST-ZIP		□ Delete	STREET ADDRES CITY-ST-ZIP TITLE	SS			☐ Change	Addition
CITY-ST-ZIP			STREET ADDRES					Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: