

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

06-10-2005 90048 001 ***61.02
N03000004021

FILED

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- SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03000004021					
1. Entity Name FASHION SHOWCASE, INC.					
Principal Place of Business 11111 BISCAYNE BLVD STE 1204 NORTH MIAMI, FL 33161			Mailing Address 11111 BISCAYNE BLVD STE 1204 NORTH MIAMI, FL 33161		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 16-1672822	
				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		
ANSCHER, LAUREN 11111 BISCAYNE BLVD STE 1204 NORTH MIAMI, FL 33161			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. 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 is required when renouncing) DATE _____					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing - Trust Fund Contribution. ☐		- \$5.00 May Be Added to Fees	
		- Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D President ANSCHER, LAUREN 11111 BISCAYNE BLVD STE 1204 NORTH MIAMI, FL 33161 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Jennifer Gordon 531 76 Street Miami Beach Fla ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOEDDE, KIMBERLY 468 NE 206 DANE #209 NORTH MIAMI BEACH, FL 33179 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sharron Cohen 62 Horseshoe Hill Road Pondridge N.Y. 10576 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GORDON, JOHN 11111 BISCAYNE BLVD STE 1201 NORTH MIAMI, FL 33161 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jason Gordon 210 W Oxford Rd Casselberry Fla 32707 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Board member O'REILLY, PATRICIA M 6660 BISCAYNE BLVD 2ND FLOOR MIAMI, FL 33138 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Board member ST. LAWRENCE, JANE 1471 NE 108 STREET MIAMI, FL 33161 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jason Gordon ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	7/28/05 ☐ Change ☐ Addition	
12. 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 617, 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: <u>Lauren Anscher</u> <u>May 31 2005</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

305-893-7200