

2001 UNIFORM BUSINESS REPORT (UBR)

5/22

FILED
Jun 25, 2001 8:00 am
Secretary of State

05-22-2001 90039 026 ***150.00

DOCUMENT # **P 00000020796**

1. Entity Name

DUNGAREEZE Clothing, Inc.

Principal Place of Business

Mailing Address

833 NORTH WEST 81ST AVENUE

Plantation, FLORIDA 33324

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

65-1019554

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

NORMAN LOBBAN
7220 NW 44 COURT
SANDERHILL, FL. 33319

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) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fee

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☐ Delete
NAME	Janice Bandhu	
STREET ADDRESS	833 NW 81 AVENUE	
CITY-ST-ZIP	Plantation, FL 33324	
TITLE	Treasurer	☐ Delete
NAME	Janice Bandhu	
STREET ADDRESS	833 NW 81 AVENUE	
CITY-ST-ZIP	Plantation, FL 33324	
TITLE	Vice President	☐ Delete
NAME	Sophia Bandhu	
STREET ADDRESS	833 NW 81 AVENUE	
CITY-ST-ZIP	Plantation, FL 33324	
TITLE	Secretary	☐ Delete
NAME	Sophia Bandhu	
STREET ADDRESS	833 NW 81 AVENUE	
CITY-ST-ZIP	Plantation, FL 33324	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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)(f), 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:

Sophia Bandhu

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

4/30/01 (954) 424-3360

CP20034 (1/1/00)