2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000031215

STYLE-TECH U.S.A., INC.

Principal Place of Business

Mailing Address

349 WEST HILLSBORO BLVD.

700 EAST DANIA BEACH BLVD., SUITE 202

DEERFIELD BEACH FL 33441

DANIA FL 33004

FILED Jan 29, 2001 8:00 am Secretary of State

01-29-2001 90137 020 ***150.00

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2. Principal Place of Business			1	3. Mailing Address					FERRI II DIN DAR			
Suite, Apt. #, elc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State				City & State			4.	FEI Number 65-0983097		Applied For Not Applicable		
Zip	ip Country			Zip Cou		itry5.		Certificate of Status Desired	\$8.75 A	8.75 Additional		
	6 Name	and Address of	Current Red	nistered Agent	1	7. Name and Address of New Registered Agent					-	
6. Name and Address of Current Registered Agent						Name						
NATIONAL CORPORATE RESEARCH, LTD, INC.						Charles March (D.O. Davidson in No.						
1406 HAYS ST., SUITE #2						Street Addre	ess (P.O. I	s (P.O. Box Number is Not Acceptable)				
TALL	AHASSEE	FL 32301									7	
						City		FL Zip Code			-	
						Olly		P-	L		4	
8. The above	named entit	y submits this sta	itement for th	e purpose of changing it	s registere	ed office or reg	istered ac	gent, or both, in the State of Florida.				
											ľ	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: F						d Agent signature re	quired when r	reinstating) DAT	É			
9. This corporation is eligible to satisfy its Intangible FILE NOW!!!						IS \$150.00					1	
Tax filing requirement and elects to do so.				After MAY 1, 2		00	10. Election Campaign Financing	.00 May Be				
(See criteria on back)				Make Check Paya	partment of	State	Trust Fund Contribution.	∐ Ádd	led to Fees			
11. OFFICERS AND DIRECTORS					12.		ΑĽ	DDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 11	_[_	
TITLE				☐ Delete	TITLE				Chang	e 🔲 Addition	8	
NAME	POULIN, CLAUDE					: 					2	
STREET ADDRESS 490 8TH STREET, ST-PROSPER, I						ET ADDRESS -ST-ZIP					934	
-	(QUEBEC) CANADA, GOM 1YO								Chang	e 🔲 Addition	CR2E034 (10/00)	
TITLE NAME	POULIN, JESSY				TITLE	į.			□ Ullany		∤ૄ	
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP (QUEBEC) CANADA, GOM 1YO					CITY	-ST-ZIP						
-TITLE	Delete								- E Chang	e	-	
NAME	POULIN, NICOLA											
STREET ADDRESS CITY-ST-ZIP	490 8TH STREET, ST-PROSPER, BEAUCE SUD (QUEBEC) CANADA, GOM 1Y0					ET ADDRESS ST-ZIP						
	(UUEBEU) CANADA, GU	M ITU						Chang	e	-	
TITLE NAME				☐ Delete	TITLE				Chang	E AUGISON		
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP					CITY	-ST-ZIP						
TITLE				☐ Delete	TITLE				☐ Chang	e 🔲 Addition		
NAME					NAMI	1					-	
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS ST-ZIP						
					-				□ Chann	N	+	
TITLE NAMÉ				☐ Delete	TITLE NAMÍ	I .			Chang	e		
STREET ADDRESS						ET ADDRESS					}	
CITY-ST-ZIP						·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)(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 11 or Block 12 if changed, or on an attachment with an address.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR