

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000072333

1- Entity Name  
PKM FASHIONS INC.

**FILED**  
**Mar 21, 2001 8:00 am**  
**Secretary of State**

03-21-2001 90062 042 \*\*\*150.00

Principal Place of Business

217 CAMBRIDGE DRIVE  
LONGWOOD FL 32779

Mailing Address

217 CAMBRIDGE DRIVE  
LONGWOOD FL 32779

C0036309



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

217 Cambridge Drive

Suite, Apt. #, etc.

3. Mailing Address

511 Derby Drive

Suite, Apt. #, etc.

City & State  
Longwood FL 32779

Zip  
32779

Country  
USA

City & State  
Altamonte Springs FL

Zip  
32714

Country  
USA

4. FEI Number  
59-3659319

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SEMINARIO, KARIN  
217 CAMBRIDGE DRIVE  
LONGWOOD FL 32779

7. Name and Address of New Registered Agent

Name  
Seminario, Karin

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

City  
ALTAMONTE SPRINGS

FL Zip Code  
32714

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)

3/15/01  
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SEMINARIO, KARIN  
217 CAMBRIDGE DRIVE  
LONGWOOD FL 32779 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
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STREET ADDRESS  
CITY-ST-ZIP  
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SEMINARIO, KARIN  
511 DERBY DR  
ALTAMONTE SPRINGS FL 32714 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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CITY-ST-ZIP  
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☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: KARIN SEMINARIO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/01 (407)808-8766  
Date Daytime Phone #

CR2E034 (10/00)