

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 13, 2001 8:00 am**  
**Secretary of State**

05-23-2001 90230 032 \*\*\*150.00

DOCUMENT # **190000093443**

1. Entity Name

**Shawn Alexandre Creations, INC.**

Principal Place of Business

**1221 NW 50th Street  
 Deerfield Beach FL 33442**

Mailing Address

**7658 Newport Rd  
 Boca Raton  
 Florida  
 33433**

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

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**Shawn ALEXANDRE CREATIONS INC  
 1221 NW 50th Street  
 Deerfield Beach  
 Florida 33442**

7. Name and Address of New Registered Agent

Name **Joe AZRA**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1221 NW 50th Street**  
 City **Deerfield Beach FL** Zip Code **33442**

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

*Joseph Azra*

**08/06/01**

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 Fees**

11. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> Delete
NAME	<b>Joe AZRA</b>
STREET ADDRESS	<b>1221 NW 50th Street</b>
CITY-ST-ZIP	<b>Deerfield Beach FL 33442</b>
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 in writing to file 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:

*Joseph Azra*

Date

Daytime Phone #

CR2034 (11/00)

77436

DO NOT WRITE IN THIS SPACE

**1850  
 2456059  
 (2)**

Attachment Doc#  
je



P000000093443  
77436

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

June 5, 2001

JEUNE MODE INC  
7658 NEWPORT TRL  
BOCA RATON, FL 33433

Subject: JEUNE MODE INC

Reference P00000093443  
Number:

? This letter only arrived on 08/06/01  
Please - have Penalty - I really cannot  
afford to pay this kind of penalty.

Thank you

Yours Sincerely, Je Agre 08/07/01

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Florida law does not allow an entity to serve as its own registered agent. Designate a registered agent, other than the entity, with a street address in Florida. The agent must sign if this is a change from the registered agent previously filed with this office.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/tr

ANNUAL REPORTS SECTION