FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 FEB 21 AM 11:13

DOCUMENT # P00000117260

1. Entity Name

EDDEN CLOTHING CO., INC.

DO NOT WRITE IN THIS SPACE

800013696388
03/07/03--01062--027 **300.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
516 W. LANTANA RD	P.O. BOX 807
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: LANTANA FL	City & State: LAKE WORTH
Zip: 33417 Country: USA	Zip: FL 33417 Country: USA

4. FEI Number: 65-1077410 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: H. CHRISTOPHER EDDEN

Street Address (P.O. Box Number is Not Acceptable): 1120 NEW PARKVIEW PLACE

City: WEST PALM BEACH FL Zip Code: 33417

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: H. Christopher Edden — Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: 1/28/03

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

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	PRESIDENT	TITLE	
NAME	CHRISTOPHER EDDEN	NAME	
STREET ADDRESS	1120 NEW PARKVIEW PLACE	STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH, FL 33417	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: H. Christopher Edden 1/28/03 (561) 616-8962

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

EDDEN®
A New Era of College Gear
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www.eddengear.com
chris@eddengear.com

February 13, 2003

Florida Department of State
Tallahassee, FL

RE: UNIFORM BUSINESS REPORT

Dear Sirs:

In moving our offices, we di not receive a copy of last year's business report. However we are asking that you reinstate our business using the enclose Uniform Business Report and appropriate filing fees.

If there are any questions or concerns, please call me at the listed numbers.

Respectfully,

H. Christopher Edden