

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P00000117260
1. Entity Name
EDDEN CLOTHING CO., INC.

03 FEB 21 AM 11:13

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
516 W. LANTANA RD
Suite, Apt. #, etc.

3. Mailing Address
P.O. BOX 807
Suite, Apt. #, etc.

800013696388

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

DO NOT WRITE IN THIS SPACE

City & State
LANTANA FL
Zip
33417
Country
USA

City & State
LAKE WORTH
Zip
FL 33417
Country
USA

4. FFI 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 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 Eden

1/28/03

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)

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 NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT CHRISTOPHER EDDEN 1120 NEW PARKVIEW PLACE WEST PALM BEACH, FL 33417
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**DO NOT WRITE
IN THIS SPACE**

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 Eden

1/28/03

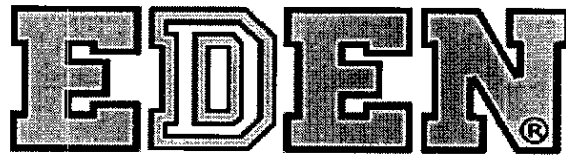
(561) 616-8962

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)



A New Era of College Gear

P.O.Box 807 • LAKE WORTH, FL 33460

T 561.616.8962 • F 561.616.8907

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 did not receive a copy of last year's business report. However we are asking that you reinstate our business using the enclosed 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