

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

APPROVED
AND
FILED

ATX1

DOCUMENT # P01000002582
1. Entity Name
LIZILY FABRICS INC

05 FEB 28 AM 8:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 10729 W FLAGLER ST		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State	
Zip 33174-1421	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

MRS

DO NOT WRITE IN THIS SPACE		4. FEI Number 65-1068167		Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
		7. Name and Address of Current Registered Agent		
		Name JESUS ALONSO Street Address (P.O. Box Number is Not Acceptable) 10729 W FLAGLER ST City MIAMI FL Zip Code 33174-1421		

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Jesus Alonso* **Jesus Alonso, President** **2/23/2005**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALONSO, JESUS 10729 W FLAGLER MIAMI, FL 33174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALONSO, ANTOLINA G 10729 W FLAGLER MIAMI, FL 33174
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11.

TITLE NAME STREET ADDRESS CITY-ST-ZIP	500048441015 03/15/05--01027--013 **150.00
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jesus Alonso* **JESUS ALONSO, PRESIDENT** **2/23/2005** **(305) 553-0241**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #