

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91882 032 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000019468 1. Entity Name BASKETS MAGNIFIQUE COMPANY																																																																																																																	
Principal Place of Business 372 NE 98 STREET MIAMI SHORES, FL 33138			Mailing Address 372 NE 98 STREET MIAMI SHORES, FL 33138																																																																																																														
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Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																															
City & State		City & State																																																																																																															
Zip		Country		Zip																																																																																																													
6. Name and Address of Current Registered Agent YCIKSON, LIANA 372 NE 98 STREET MIAMI SHORES, FL 33138				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																													
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: <u><i>Liana Ycikson</i></u> 4-29-03 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when appointing)																																																																																																																	
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>YCIKSON, LIANA PRES</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>372 NE 98 STREET</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI SHORES, FL 33138</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>SANCHEZ, JULIE A TREAS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>372 NE 98 STREET</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI SHORES, FL 33138</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>YCIKSON, WILLIAM SECTY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>372 NE 98 STREET</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI SHORES, FL 33138</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>YCIKSON, LULU</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>372 NE 98 STREET</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI SHORES, FL 33138</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>YCIKSON, MORRIS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>372 NE 98 STREET</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI SHORES, FL 33138</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	NAME	☐ Delete	NAME	YCIKSON, LIANA PRES		STREET ADDRESS	372 NE 98 STREET		CITY-ST-ZIP	MIAMI SHORES, FL 33138		TITLE	NAME	☐ Delete	NAME	SANCHEZ, JULIE A TREAS		STREET ADDRESS	372 NE 98 STREET		CITY-ST-ZIP	MIAMI SHORES, FL 33138		TITLE	NAME	☐ Delete	NAME	YCIKSON, WILLIAM SECTY		STREET ADDRESS	372 NE 98 STREET		CITY-ST-ZIP	MIAMI SHORES, FL 33138		TITLE	NAME	☐ Delete	NAME	YCIKSON, LULU		STREET ADDRESS	372 NE 98 STREET		CITY-ST-ZIP	MIAMI SHORES, FL 33138		TITLE	NAME	☐ Delete	NAME	YCIKSON, MORRIS		STREET ADDRESS	372 NE 98 STREET		CITY-ST-ZIP	MIAMI SHORES, FL 33138		TITLE	NAME	☐ Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																	
SIGNATURE: <u><i>Liana Ycikson</i></u> 4-29-03 3057511532 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																	

CR2034 (10/02)

90129068



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1094973** Applied For ☐ Not Applicable

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