

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

04-04-2002 90015 039 ***150.00

DOCUMENT # P01000022469

1. Entity Name

FASHION WASH, INC

Principal Place of Business

**3189 COCOPLUM CIR
 COCONUT CREEK FL 33063**

Mailing Address

**3189 COCOPLUM CIR
 COCONUT CREEK FL 33063**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1079833

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**PESTANO, ANTOIN JR
 7758 NW 44 ST
 SUNRISE FL 33351**

7. Name and Address of New Registered Agent

Name **Luis A. Escobar Jr**

Street Address (P.O. Box Number is Not Acceptable)
6209 West Commercial Bk

Suite # 7

City **Tamarac,**

FL

Zip Code

33319

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

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) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 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 **DP** ☐ Delete
 NAME **ALVARADO, MIGUEL**
 STREET ADDRESS **3189 COCOPLUM CIR**
 CITY-ST-ZIP **COCONUT CREEK FL 33063**

TITLE **DV** ☐ Delete
 NAME **TAMAYO, TATIANA**
 STREET ADDRESS **3189 COCOPLUM CIR**
 CITY-ST-ZIP **COCONUT CREEK FL 33063**

TITLE **DV** ☒ Delete
 NAME **MENDEZ, MIGUEL**
 STREET ADDRESS **3189 COCOPLUM CIR**
 CITY-ST-ZIP **COCONUT CREEK FL 33063**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Change ☒ Addition
 NAME **Margareth Tamayo**
 STREET ADDRESS **3189 cocoplum Circle**
 CITY-ST-ZIP **Coconut Creek FL 33063**

TITLE **Alberto ESTEVES I.V.P.** ☐ Change ☒ Addition
 NAME
 STREET ADDRESS **3189 Cocoplum Circle**
 CITY-ST-ZIP **Coconut Creek, FL 33063**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ 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)(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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/2002 (954) 275-8192

Date

Daytime Phone #

CR2E034 (9/01)