

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State
 05-29-2002 90689 008 ***150.00

0231396
 AV

DOCUMENT # P01000049694

1. Entity Name
UNDERWEARHOUSE #3, INC.

Principal Place of Business

7550 SW 57TH AVENUE SUITE 211
SOUTH MIAMI FL 33143

Mailing Address

7550 SW 57TH AVENUE SUITE 211
SOUTH MIAMI FL 33143

2. Principal Place of Business

8865 SW 132 ST

Suite, Apt. #, etc.

3. Mailing Address

8865 SW 132 ST

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-1112428

Applied For

Not Applicable

Zip

33176

Country

USA

Zip

33176

Country

USA

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SCHARLIN, HOWARD R ESQ
1399 SW FIRST AVENUE 4TH FLOOR
MIAMI FL 33130

7. Name and Address of New Registered Agent

Name DAVID MICHAEL SCHARLIN

Street Address (P.O. Box Number is Not Acceptable)

8865 SW 132 ST

City

MIAMI

FL

Zip 33176

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

5/1/02

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 ☒ **Delete**
NAME **SCHARLIN, DAVID MICHAEL**
STREET ADDRESS **7550 SW 57TH AVENUE SUITE 211**
CITY-ST-ZIP **SOUTH MIAMI FL 33143**

TITLE ☒ **Delete**
NAME **FISHER, RANDALL C**
STREET ADDRESS **7550 SW 57TH AVENUE SUITE 211**
CITY-ST-ZIP **SOUTH MIAMI FL 33143**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

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 **PD** ☒ **Change** ☐ **Addition**
NAME
STREET ADDRESS **8865 SW 132 ST.**
CITY-ST-ZIP **MIAMI, FL 33176**

TITLE **PD** ☒ **Change** ☐ **Addition**
NAME
STREET ADDRESS **8865 SW 132 ST.**
CITY-ST-ZIP **MIAMI, FL 33176**

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

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

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
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 **DAVID MICHAEL SCHARLIN** **5/1/02** **786-268-1100**

Date

Daytime Phone #

CR2E034 (9/01)