2002 UNIFORM BUSINESS REPORT (UBR)

indicated on this report or supplemental report is true of the corporation or the receiver or trustee empoyed changed, or on an attachment with an address, with

SIGNATURE:

Apr 23, 2002 8:00 am Secretary of State P01000059364 DOCUMENT # 03-22-2002 90015 036 ***150.00 1. Entity Name ORANGE CLOTHING CO. Principal Place of Business Mailing Address 141 NE 3RD AVENUE 141 NE 3RD AVENUE 12TH FLOOR 12TH FLOOR MIAMI FL 33132 MIAMI FL 33132 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired \Box 7. Name and Address of New Registered Agent --- 6. Name and Address of Current Registered Agent DEUTSCH, SCOTT H Street Address (P.O. Box Number is Not Acceptable) 141 NE 3RD AVENUE 12TH FLOOR MIAMI FL 33132 Zip Code City FL 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 it applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. (9/01) ☐ Delete TITLE ☐ Change TITLE しゅくしょう DEUTSCH, SCOTT H NAME NAME 141 NE 3RD AVENUE 12TH FLOOR STREET ADDRESS STREET ADDRESS MIAMI FL 33132 CITY-ST-7IP CITY-ST-ZIP JEWIRER GETZ ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition 👤 TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TIT) F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this fling 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 try's 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 empoyered to execute this report as required by Chapter 607, Florida Statutes: and that ny name appears in Block 11 or Block 12 if

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