

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

**FILED**  
**Jul 18, 2002 8:00 am**  
**Secretary of State**

07-18-2002 90131 047 \*\*\*150.00

DOCUMENT # **P010000060148**

1. Entity Name

**INNOVATION FASHIONS SEWING CONTRACTOR AND  
FINISH CORP.**

**122204**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**20200 NE 15 CT**

3. Mailing Address

**SAME**

Suite, Apt. #, etc.

**SUITE 6**

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**North Miami Beach, FL**

City & State

Zip

**33179**

Country

**USA**

Zip

Country

4. FEI Number

**65-1114178**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**STERLING, ANA**

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

**830 W 54 ST**

City

**Hialeah**

**FL**

Zip Code

**33012**

**DO NOT WRITE  
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**D  
STERLING, ANA  
830 W 54 ST  
Hialeah, FL, 33012**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
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NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

**ANA Sterling**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/15/02**

Date

Daytime Phone #

**305-821-8415**

CR2E034B (12/01)

*Attachment*  
*122204*

***Innovation Fashion Sewing contractor and Finish Corp.***

20200 N.E. 15 Court.

Suite # 6

North Miami Beach, Florida, 33179

(786)344-3027

North Miami Beach 15<sup>th</sup> July, 2002

Division of Corporation

P.O. Box 1500

Tallahassee, Fl 32302-1500

Ref: Document #P01000060148

This note is to inform that I never receive any form to fill the UBR.

When I made the Reinstatement on 2001 I over look the change of address this is my second year in this address, and now that I came to the accountant to fill the sales tax he inform me that I am late in this renovation

Please take note of the new address:

**Innovation Fashion Sewing contractor and Finish Corp.**

20200 N.E. 15 Court.

Suite # 6

North Miami Beach, Florida, 33179.

(786)344-3027

Please accept my payment and lateness.

*Ana Sterling*  
Ana Sterling  
President