

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90338 018 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000093388

1. Entity Name
FASHION COLOR, CORP.

DO NOT WRITE IN THIS SPACE

80053683

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
18179 NW 73rd. Ave

3. Mailing Address
18179 NW 73rd. Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#305

#305

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number
65-1147598

Applied For
Not Applicable

Zip
33015

Country
USA

Zip
33015

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current 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.

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 P
NAME GUTIERREZ, Catherine A.
STREET ADDRESS 18179 NW 73rd. Ave. #305
CITY- ST- ZIP Miami, Fl. 33015

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE VP
NAME ROJAS, Elena Yakelin
STREET ADDRESS 420 N.E. 35 Street #4
CITY- ST- ZIP Miami, Fl. 33137

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE S
NAME Gutierrez, Liliana P.
STREET ADDRESS 1120 NW 59 Ct.
CITY- ST- ZIP Miami, Fl. 33024

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE T
NAME Adriana, EUz A.
STREET ADDRESS 18179 NW 73rd. Ave. #305
CITY- ST- ZIP Miami, Fl. 33015

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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: *Elena Yakelin ROJAS* Vice-President.-

03/14/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)