5/27

FILED
Jun 19, 2002 8:00 am
Secretary of State
05-27-2002 90435 025 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 01000113824

1. Entity Name
AT'S A NICE, INC.

DO NOT WRITE IN THIS SPACE

93808

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
C/O YAHYA KOITA	C/O YAHYA KOITA
Suite, Apt. #, etc. 2779 Bird Avenue	Suite, Apt. #, etc. 2779 Bird Avenue
City & State Miami, Florida	City & State Miami, Florida
Zip 33133 Country U.S.A.	Zip 33133 Country U.S.A.

4. FEI Number 65 1159106 ☐ Applied For ☐ Not Applicable

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 YAHYA KOITA

Street Address (P.O. Box Number Is Not Acceptable) 2779 Bird Avenue

City Miami FL Zip Code 33133

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 Yahya Koita YAHYA KOITA PRES 6/12/02
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/D NAME YAHYA KOITA STREET ADDRESS 2779 Bird Avenue CITY-ST-ZIP Miami, FL 33133		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/01)

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: Yahya Koita YAHYA KOITA 4/22/02 (305)444-6646
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #