

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90054 007 ***150.00

DOCUMENT # P01000114207

1. Entity Name

RAINBOW STAR FASHION, INC.

Principal Place of Business

513 N.W. 94th St
 Miami, FL 33150

Mailing Address

513 N.W. 94th St
 Miami FL 33150

2. Principal Place of Business

27 S.W. 19 AV

3. Mailing Address

7105 S.W. 8 St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

Zip

33135

Country

Zip

33144

Country

4. FEI Number

65-1155830

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SILVA, HECTOR R.
 513 N.W. 94th St
 Miami FL 33150

7. Name and Address of New Registered Agent

Name SILVA, HECTOR R.
 Street Address (P.O. Box Number is Not Acceptable)
 27 S.W. 19 AV
 Miami
 City FL Zip Code 33150

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 of individual or principal officer 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) ☐

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. ☐

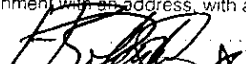
\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SILVA HECTOR R. 513 N.W. 94th St Miami FL 33150	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	27 S.W. 19 AV. MIAMI, Florida 33150	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	UD ARTILES, MARTA R. 513 N.W. 94th St Miami FL 33150	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD QUESADA ROSARIO 513 N.W. 94th St Miami FL 33150	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02 (305) 226-3443