

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90199 045 ***150.00

DOCUMENT # P01000116768

1. Entity Name
IVA'S STUDIO, INC.



Principal Place of Business
1261 SW 104TH PASSAGE STE 210
MIAMI FL 33174

Mailing Address
1261 SW 104TH PASSAGE STE 210
MIAMI FL 33174

2. Principal Place of Business

918 NE 2nd Court

3. Mailing Address

918 NE 2nd Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hallandale Beach, FL

City & State

Hallandale Beach, FL

Zip
33009

Country
USA

Zip
33009

Country
USA

4. FEI Number

65-1159948

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MENDELOWITZ, IVA

1261 SW 104TH PASSAGE STE 210

MIAMI FL 33174

7. Name and Address of New Registered Agent

Name

Iva Mendelowitz

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

918 NE 2nd Court

City

Hallandale Beach

FL

Zip Code

33009

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME MENDLOWITZ, IVA
STREET ADDRESS 1261 SW 104TH PASSAGE STE 210
CITY-ST-ZIP MIAMI FL 33174

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☒ Change ☐ Addition
NAME Iva Mendelowitz
STREET ADDRESS 918 NE 2nd Court
CITY-ST-ZIP Hallandale Beach, FL 33009

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other I am empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-03 (305) 970-6739

Date

Daytime Phone #

CR2E034 (10/02)