2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000120300

Entity Name: KIM PALL CREATIONS WHOLESALE, INC.

Current Principal Place of Business:

8551 HANDCART RD
ZEPHYRHILLS, FL 33544

New Principal Place of Business:

6210 FORT KING ROAD
ZEPHYRHILLS, FL 33541

Current Mailing Address:

8551 HANDCART RD
ZEPHYRHILLS, FL 33544

New Mailing Address:

FEI Number: 26-0017013 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZ, JAMES
235 N GARDEN AVE
CLEARWATER, FL 33755

Name and Address of New Registered Agent:

CHILDERS, DIANA E
38434 FIFTH AVENUE
ZEPHYRHILLS, FL 33540

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: DIANA E. CHILDERS 04/30/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Change (X) Addition
Name: CHILDERS, RHODA A
Address: 8645 HANDCART ROAD
City-St-Zip: ZEPHYRHILLS, FL 33544

Title: P/D ( ) Change (X) Addition
Name: SERNEELS, STEVEN D
Address: 8551 HANDCART ROAD
City-St-Zip: ZEPHYRHILLS, FL 33544

Title: V/D ( ) Change (X) Addition
Name: SERNEELS, JULIE A
Address: 8551 HANDCART ROAD
City-St-Zip: ZEPHYRHILLS, FL 33544

Title: T/D ( ) Change (X) Addition
Name: CHILDERS, JAMES W
Address: 8645 HANDCART ROAD
City-St-Zip: ZEPHYRHILLS, FL 33544

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIE A. SERNEELS V/D 04/30/2002
Electronic Signature of Signing Officer or Director Date