

FILED
Jul 21, 2003 8:00 am
Secretary of State

05-05-2003 91759 034 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

5/5/

DOCUMENT # P02000031837	
1. Entity Name BERNARDA MORALES FASHIONS, INC.	
	
Principal Place of Business 5501 SW 77TH COURT APT 205C MIAMI FL 33155	Mailing Address 5501 SW 77TH COURT APT 205C MIAMI FL 33155
2. Principal Place of Business 5308 NW 7th Street Suite, Apt. # etc. APT #43 City & State Miami, FL Zip 33126 Country	
3. Mailing Address 5308 NW 7th Street Suite, Apt. # etc. APT #43 City & State Miami, FL Zip 33126 Country	
4. FEI Number *75-3031832	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZAPATA, EDDY 5501 SW 77TH COURT APT 205C MIAMI FL 33155	
7. Name and Address of New Registered Agent Name: Zapata Eddy Street Address (P.O. Box Number is Not Acceptable) 8308 NW 7th Apt #43 City: Miami FL Zip Code: 33126	
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:  DATE: 4/26/03 (NOTE: Registered Agent Signature required when filing.)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State	
8. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP MORALES, BERNARDA 5501 SW 77TH COURT APT 205C MIAMI FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OV ZAPATA, EDDY 5501 SW 77TH COURT APT 205C MIAMI FL 33155
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP MORALES, BERNARDA 5308 NW 7th Street apt 43 MIAMI FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OV Zapata, Eddy 8308 NW 7th Street apt. 43 MIAMI FL 33126
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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 like empowered.	
SIGNATURE:  DATE: 7/15/03 (305)266-9097 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

44005584

CHECK HERE IF MAKING CHANGES

CP202034 (10/02)

A Mended The FEI Number and change the