

FILED
May 27, 2003 8:00 am
Secretary of State

04-28-2003 91435 009 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000076733		NC VB 3/6/03 ✓			
1. Entity Name CHILDREN'S COUTURE, INC.					
Principal Place of Business 13550 REFLECTIONS PARKWAY SUITE 4-402 FORT MYERS, FL 33907		Mailing Address 13550 REFLECTIONS PARKWAY SUITE 4-402 FORT MYERS, FL 33907 US			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 72-1529124	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FREDERICI, DEBORAH L 13550 REFLECTIONS PARKWAY SUITE 4-402 FORT MYERS, FL 33907				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <i>[Signature]</i> DATE 5/24/03 Signature, typed or printed name of registered agent and date is applicable. (NOTE: Registered Agent signature required when changing.)					
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
P FREDERICI, DEBORAH L PO BOX 08297 FORT MYERS, FL 33908		Same Same 13550 Reflection Lakes Pkwy, 4-402 Ft. Myers, FL 33907			
S FREDERICI, DEBORAH L PO BOX 08297 FORT MYERS, FL 33908		Same Same 13550 Reflection Lakes Pkwy, 4-402 Ft. Myers, FL 33907			
T FREDERICI, DEBORAH L PO BOX 08297 FORT MYERS, FL 33908		Same Same 13550 Reflection Lakes Pkwy, 4-402			
Delete		Change Addition			
Delete		Change Addition			
Delete		Change Addition			
Delete		Change Addition			
Delete		Change Addition			
Delete		Change Addition			
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: <i>[Signature]</i>		4/24/03 239-274-5437			

CR2034 (10/02)