2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000130560

1. Entity Name
JACKELINE FASHIONS, INC.

001246 AT

Principal Place of Business	Mailing Address
2801 E. IRLO BRONSON MEM. HWY. UNIT B 53-55 KISSIMMEE FL 34769	2801 E. IRLO BRONSON MEM. HWY. UNIT B 53-55 KISSIMMEE FL 34769

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address		
4301 W VINE ST.	**2060 CASCADES BLVD**		
Suite, Apt #, etc. **LINE C, BOOTH 2 & 4**	Suite, Apt. #, etc. **APT. 207**		
City & State **KISSIMMEE, FLORIDA**	City & State **KISSIMMEE, FLORIDA**	4. FEI Number **65-1167090**	Applied For / Not Applicable
Zip **34746**	Country	Zip **34741**	Country	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MEDINA, JACKELINE 2060 CASCADES BLVD. APT 207 KISSIMMEE FL 34741	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 _____
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		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MEDINA, JACKELINE 2060 CASCADES BLVD. APT. 207 KISSIMMEE FL 34741	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MEDINA, ABILIO 2060 CASCADES BLVD. APT. 207 KISSIMMEE FL 34741	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (20/01)

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 Stat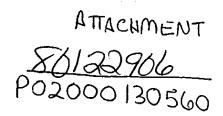utes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   05-25-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

May 21, 2003

Department of State

Re: 2003 for Profit Corporation, Uniform Business Report (UBR).

Dear Sir or Madam:

Our Corporation, **Jackeline Fashion, Inc.**, was filed on December 10, 2002 and we process the Certificate of Registration on 03/11/2003, we do not have still a year operating as a Corporation. However, we are only a small clothes store in the Flea Market so far, with not enough income to growth and to make big investment, so we just find a CPA to start making the administration in an appropriate way.

Checking all the paperwork regard to our Corporation with the CPA, I found that I did not send on time the form above mentioned, and it says that there is a fine of $400.00 additional to the $150.00, if a Corporation do not file on time. I am sending the amount of $150.00, which is the normal fee, and I would like to ask you the opportunity to pay the amount of $400.00 through payment arrangements.

I really appreciate all your cooperation and help in this matter. If you have any further questions, do not hesitate to contact me. Thank you.

Sincerely,

Jackeline Medina