

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075399

FILED
Jun 06, 2005
Secretary of State

Entity Name: AMERICAN FASHIONS BY VIVIAN, INC.

Current Principal Place of Business:

14 N.E. 1ST STREET
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

14 N.E. 1ST STREET
MIAMI, FL 33125

New Mailing Address:

FEI Number: 20-0285055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOMDICH, SHIMIT
24 NE 4 ST
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

KORDICH, SHLOMIT
14 NE 1 ST
MIAMI, FL 33125 US

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: SHLOMIT KORDICH

06/06/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COHEN, AVIVA
Address: 14 N.E. 1ST STREET
City-St-Zip: MIAMI, FL 33125

Title: SD () Delete
Name: KORDICH, SHLOMIT
Address: 14 N.E. 1ST STREET
City-St-Zip: MIAMI, FL 33125

Title: VD () Delete
Name: KORDICH, AVIV
Address: 100 LINCOLN RD., BLD. DECO PLAGE #1526
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: AVIVA COHEN

P

06/06/2005

Electronic Signature of Signing Officer or Director

Date