## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 14, 2005 8:00 am Secretary of State

Procept Place of Business	DOCUMENT # P04000152102  1. Entity Name EIGHT STREET FASHION OUTLET, INC.						07-14-2005 9	00078 014 ***150	.00	
MMMI, FL 33184	Principal Place of Business Mailing Address									
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   City & State   City & City & State   City & State   City & State   City & State   City & City & State			14242 SW 8TH ST # >				_	~~neg9		
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   City & State   City & City & State   City & State   City & State   City & State   City & City & State	MIMMI, FL 33104					1 48821881 42	2(	)		
City & State  City & State Desired   Se. 75 Acceptable   Sec. 75 Acce	Principal Place of Business     3. Mailing Address									
Country   Zip   Country   Zip   Country   Zip   Country   S. Certificate of Sistus Desired   \$8.75 Accitional Fee Required   \$8.75 Accitional Fee Required			Suite, Apt. #, etc.		05172005	Chg-P	CR2E034 (10/03)			
Some and Address of Current Registered Agent  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  8. The above named antily submits this statement for the purpose of changing its registered dilice or registered agent, or both, in the State of Florida. I am lamilar with, and accept the obligations of registered agent.  SIGNATURE    Signature there is \$150.00   Due by \$   FL	City & State		City & State			4. FEI Numb	858 <b>0</b> 32			
AMARTINEZ, RAFAEL   Delete   MILE   MARTINEZ, RAFAEL   AMARTINEZ, RAFAEL   AMARTINEZ, RAFAEL   Delete   MILE   MARTINEZ, RAFAEL   AMARTINEZ, RAFAEL   Delete   MILE   MARTINEZ, MARTINEZ	Zip	Country	Zip	Country	<del>y</del>			□ \$8.75 Add	itional	
MARTINEZ, RAFAEL 14242 SW 8TH ST MIAMI, FL 3184  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Signature torritor projectors agent and blef depictable.   ROTE Registered Agent agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    Signature torritor projectors agent and blef depictable.   ROTE Registered Agent agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.   Politic Projectors agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	6. Name and Address of Current Registered Agent				7. Name and	Address of New R	<u> </u>			
Sirrest Address (P.O. Box Number is Not Acceptable)	MADTINEZ DAFAEI				Name					
E. The above named antity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    Signature typed or private agent and about it opicizable.   (NOTE: Registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	14242 SW 8TH ST				Street Address (P.O. Box Number is Not Acceptable)					
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, types or printed name of registered agent and site if applicable.  FILE NOW!!! FEE IS \$150.00  Due by September 7, 2005  P. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.  ITILE NAME SIRET ADDRESS CITY-S1-2P  MIAMI, FL 33185  ITILE NAME MARTINEZ, RAFAEL SIRET ADDRESS CITY-S1-2P  MIAMI, FL 33185  ITILE NAME NAME SIRET ADDRESS CITY-S1-2P  MIAMI, FL 33185  Delete  TITLE NAME SIRET ADDRESS CITY-S1-2P  Delete  TITLE NAME SIRET ADDRESS CITY-S1-2P  TITLE NAME SIRET ADDRESS SIRET ADDRESS CITY-S1-2P  TITLE NAME SIRET ADDRESS SIRET ADDRES	INTERIOR SOLUTION									
The obligations of registered agent.    SIGNATURE     Surature, typed or present agent and size of approache.   (ROTE: Registered Agent agent agent agent and size of approache.   (ROTE: Registered Agent a				Γ	City			FL Zip Code	<del></del>	
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II IIILE NAME STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33185  CITY-ST-ZIP MIAMI, FL 33185  CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TIT										
Trust Fund Contribution.    Added to Fees   Corporation did not receive the prior notice.	SIGNATURE									
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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 securate 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 be 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 actions, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPEU OR PRINTED GIAME OF SIGNING OF DIES OR DIRECTOR Date Daytime Phone #