

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

07-28-2003 90142 017 ***158.75

P93000007582

FILED

03 AUG 21 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000007582

1. Entity Name
SON FASHIONS, INC.



Principal Place of Business
1751 W 38TH PLACE
SUITE 1008A
HIALEAH FL 33012
US

Mailing Address
1751 W 38TH PLACE
SUITE 1008A
HIALEAH FL 33012
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0385489

Applied For

Not Applicable

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

RODRIGUEA & CASAS, INC.
4513 PALM AVENUE
HIALEAH FL 33012

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 \$550.00

After September 10, 2003 Fee will be \$750.00

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

TITLE PSD
NAME SORIANO, ONELIA
STREET ADDRESS 6431 N.W. 199TH ST.
CITY-ST-ZIP MIAMI FL 33015 ☐ Delete

TITLE VTOS
NAME SORIANO, SANDRA
STREET ADDRESS 6431 N.W. 199TH ST.
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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)(l), 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:

Sandra Soriano
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 823-3602

CR2E034 (4/03)

July 23, 2003

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Attn: Tyrone Scott
(850) 245-6017
COPY

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Son Fashions, Inc.
Doc# P93000007582

To Whom It May Concern:

On or about last week, I received a 60 day notice of renewal for the 2003 UBR, however, at this time, I would like to explain that on January 20, 2003 I mailed the 2003 Uniform Business Report, along with check #13297 in the amount of \$158.75 (photocopy attached).

I assume, that if you have not received it by now, it is because said payment and form must have been lost in the mail.

Please accept check #13473, which I am enclosing at this time, in the amount of \$158.75, replacing the aforesaid, and if you would please waive the penalties, since said payment was made on time, and what happened was beyond my control.

Thank you for your attention, as it is of utmost importance to me, and I await your reply.

Respectfully,

Son Fashions, Inc.



Sandra Soriano
Director