

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2001 8:00 am
Secretary of State

07-16-2001 90001 047 ***155.00

0063663 AV

DOCUMENT # P93000075620

1. Entity Name
INFINITY FASHIONS INC.

Lee

Principal Place of Business
3738 N.W. 16 STREET
LAUDERHILL FL 33311

Mailing Address
3738 N.W. 16 STREET
LAUDERHILL FL 33311



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0445874**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAKON, SIMON
11751 NW 18 CT
PLANTATION FL 33323

Name **Kakon, Simon**
 Street Address (P.O. Box Number is Not Acceptable)
10071 NW 13 St
 City **Plantation** FL Zip Code **33324**

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.

SIGNATURE *Simon Kakon VP*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7.5.01
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing ☒ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	KAKON, OFRA	
STREET ADDRESS	3738 NW 16TH ST	
CITY-ST-ZIP	LAUDERHILL FL 33311	
TITLE	V	<input type="checkbox"/> Delete
NAME	KAKON, SIMON	
STREET ADDRESS	3738 NW 16TH ST	
CITY-ST-ZIP	LAUDERHILL FL 33311	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

INFINITY FASHIONS, INC.
3738 NW 16TH ST.
LAUDERHILL, FL. 33311
(954) 791-4433 FAX (954) 797-9933

Attachment *A0071354*

INFINITY FASHIONS, INC.

www.infinityfashions.com

P3000075620 ⁷⁻⁵⁻⁰¹

To Whom It May Concern:

Enclosed is check # 12538 for \$155 per conversation with someone in your
off today July 5, 2001 at 3:45 pm. I called and explained my situation that a check
was sent in April and was apparently lost in the mail. Thank you for understanding.

If the old check happens to show up please return it.



Thank You,

Sabrina Kakon

