2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9500060019 Feb 26, 2000 8:00 am Secretary of State SOUTHEAST CLOTHING COMPANY 02-26-2000 90003 046 ***150.00 Mailing Address Principal Place of Business 7631 N.W. 6TH COURT 298 INDIAN TRACE PLANTATION FL 33324-1406 WESTON FL 33326 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0607159 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BECKER, MAXINE Street Address (P.O. Box Number is Not Acceptable) 7631 N.W. 6TH COURT PLANTATION FL 33324 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change ☐ Delete TITLE TITLE BECKER, MAXINE NAME NAME STREET ADDRESS 7631 N.W. 6TH COURT STREET ADDRESS **PLANTATION FL 33324** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ... Delete TITLE BECKER, ANDREW NAME NAME 7631 N.W. 6TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **PLANTATION FL 33324** CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE BECKER, KIMBERLY NAME NAME STREET ADDRESS 7631 N.W. 6TH COURT STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33324 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE BECKER, ALLISON NAME NAME 7631 N.W. 6TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33324 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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. HICEROR DIRECTOR SECKER X MISTON X95

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