

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**Jun 13, 2000 8:00 am**  
**Secretary of State**

06-13-2000 90010 016 \*\*\*150.00

**662462**

DO NOT WRITE IN THIS SPACE

**DOCUMENT #** P95000087084**1. Entity Name**nakedearth Society Co.  
DBA naked Earth**Principal Place of Business****Mailing Address**901 Pennsylvania Ave #2  
Miami Beach, FL 33139**2. Principal Place of Business**

Same as above

**3. Mailing Address**

same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

**4. FEI Number**

65-0619632

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**Brito & Brito Accountants  
407 Lincoln Rd #5B  
Miami Beach, FL  
33139

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.****SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State****10. Election Campaign Financing**  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE: PRESIDENT, SECRETARY ☐ Delete  
NAME: SHERYN APALOS  
STREET ADDRESS: 1525 MERIDIAN AVE #210  
CITY-ST-ZIP: MIAMI BEACH, FL 33139TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY-ST-ZIP: ☐ Change ☐ AdditionTITLE: VICE PRESIDENT, TREASURER ☐ Delete  
NAME: NELSON ZANE HOBBS  
STREET ADDRESS: 1050 76TH ST. #4  
CITY-ST-ZIP: MIAMI BEACH, FL 33139TITLE: ☐ Change ☐ Addition  
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CITY-ST-ZIP: ☐ Change ☐ Addition**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] (PRESIDENT)

5/5/2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)