

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000003354

1. Entity Name

SIMPLY POSH, INC.

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90209 008 ***150.00

0081678

Principal Place of Business
271
650 E. EAU GALLIE CAUSEWAY
INDIAN HARBOR BEACH FL 32937

Mailing Address
121 LANSING ISLAND DRIVE
INDIAN HARBOR BEACH FL 32937

755363



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Simply Posh
Suite, Apt. #, etc.
Indian Harb. Bch
City & State

3. Mailing Address

271 E.au Malli
Suite, Apt. #, etc.
Fla. 32937
City & State

4. FEI Number 65-0623134

Applied For
Not Applicable

Zip Country
Broward

Zip Country

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

6. Name and Address of Current Registered Agent

ROSSI, EDNA
6450 N WICKHAM ROAD #113
MELBOURNE FL 32940

7. Name and Address of New Registered Agent

Name Edna Rossi
Street Address (P.O. Box Number is Not Acceptable)
271 E. au Malli Blvd
Indian Har Bch
City FL Zip Code 32937

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, 2001 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

TITLE VT
NAME ROSSI, CHARLES ☐ Delete
STREET ADDRESS 121 LANSING ISLAND DR
CITY-ST-ZIP INDIAN HARBOR BEACH FL

TITLE PS
NAME ROSSI, EDNA ☐ Delete
STREET ADDRESS 121 LANSING ISLAND DR
CITY-ST-ZIP INDIAN HARBOR BEACH FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME Charles A. Rossi
STREET ADDRESS 121 LANSING ISLAND DR
CITY-ST-ZIP INDIAN HARBOR BEACH FL

TITLE ☐ Change ☐ Addition
NAME Edna Rossi
STREET ADDRESS 121 LANSING ISLAND DR
CITY-ST-ZIP INDIAN HARBOR BEACH FL

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

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

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

TITLE ☐ Change ☐ 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

4/28/01

Daytime Phone #

CR2E034 (10/00)