

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90269 004 \*\*\*150.00

DOCUMENT # P96000013303

1. Corporation Name  
168 FRESH LOOK, INC.

Principal Place of Business

168 S.E. 1 ST.  
801  
MIAMI FL 33131  
US

Mailing Address

P.O. BOX 110223  
MIAMI FL 33111  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/12/1996

4. FEI Number

65-0656561

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

KAHN, DONALD J  
317 71ST STREET  
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

81 Name

JEFF SHERMAN

82 Street Address (P.O. Box Number is Not Acceptable)

168 SE 1 ST #801

83 City

MIAMI

84 State

FL

85 Zip Code

33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

1-20-99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME SHERMAN, ALAN J.  
STREET ADDRESS 555 N.E. 15 ST., 30F  
CITY-ST-ZIP MIAMI FL

TITLE ☒ DELETE

NAME STASEVICH, DEBORAH  
STREET ADDRESS 168 S.E. 1 ST., #801  
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME SHERMAN, BERTA  
STREET ADDRESS 9341 COLLINS AVE., #408  
CITY-ST-ZIP MIAMI BEACH FL

TITLE ☐ DELETE

NAME SHERMAN, BRYAN  
STREET ADDRESS 168 S.E. 1 ST., #801  
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME VP, P  
SHERMAN, ALAN J.  
1.3 STREET ADDRESS 555 NE 15 ST #30F  
1.4 CITY-ST-ZIP MIAMI, FL 33132

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME SHERMAN, BEGA  
3.3 STREET ADDRESS 168 SE 1 ST #801  
3.4 CITY-ST-ZIP MIAMI, FL 33131

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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

1-20-99

Date

3053750720

Daytime Phone #

CR2E034 (1/1/98)