

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P96000034867

1. Entity Name

BELT ON YOU, INC.

FILED

02 SEP 18 PM 4:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

16236 SW 14TH STREET

3. Mailing Address

16236 SW 14TH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PEMBROKE PINES, FL

City & State

PEMBROKE PINES, FL

4. FEI Number

65-0663178

Applied For

Not Applicable

Zip

33027

Country

USA

Zip

33027

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

RAFAEL FHIMA

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

16236 SW 14TH STREET

City

PEMBROKE PINES

FL

Zip Code

33027

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.

RAFAEL FHIMA

(NOTE: Registered Agent signature required when reinstating)

DATE

9-9-02

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
RAFAEL FHIMA
16236 SW 14TH STREET
PEMBROKE PINES, FL 33027

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
300008138179--1
-10/02/02--01003--006
*****300.00 *****300.00

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAFAEL FHIMA

Date

954-463-0620

Daytime Phone #

CR2E034B (12/01)

Attachments
**Belt on You, Inc.
16236 SW 14th Street
Pembroke Pines, FL 33027**

2ed 2

9-09-02

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

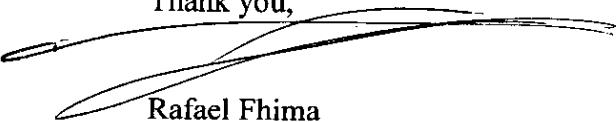
Re: P96000034867

To Whom It May Concern:

Please be advised that the address of my corporation has changed and I never received my 2001 UBR.

I have enclosed a blank report that I have filled out, along with the filing fees for 2001 and 2002. Please reinstate my corporation and update my information.

Thank you,


Rafael Fhima
President