2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P96000071239 Sep 14, 2000 8:00 am 1. Entity Name **Secretary of State** MODERN FASHION INC. 09-14-2000 90014 033 ***550.00 Principal Place of Business Mailing Address 2924 NORTH STATE ROAD 7 2924 NORTH STATE ROAD 7 LAUDERDALE LAKES FL 33313 LAUDERDALE LAKES FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0695037 Not Applicable Zip Country Country \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KHO. Young KHO, TAE YOUNG K Street Address (P.O. Box Number is Not Acceptable) 851 San Remo Drive 1233 FAIRLAKE TRACE #802 WESTON FL 33326 Zip Code 33326 Weston 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. <u>Tae Young Kho,</u> pres. SIGNATURE . DATE ne of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PST** Change Addition TITI F TITL F ☐ Delete **PST** KHO. TAE Y NAME NAME KHO, Tae Young STREET ADDRESS 1233 FAIRLAKE TRACE #802 STREET ADDRESS 851 San REmo Dr. CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33326 Weston, FL 33326 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete NAME NAME ----STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change ☐ Delete TITLE NAME NAME STREET ANDRESS STREET ADDRESS CITY-ST-ZIP 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

Tae Moung Kho, President 8/19/00(954)731-8844