

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90106 036 ***150.00

DOCUMENT # P97000014294

1. Entity Name
RECYCLED FASHIONS, INC.



Principal Place of Business
901 E 10TH ST
BAY 22
HIALEAH FL 33010
US

Mailing Address
901 E 10TH AVE
BAY 22
HIALEAH FL 33010
US



2. Principal Place of Business
RECYCLED FASHIONS, INC.

3. Mailing Address
RECYCLED FASHIONS, INC.

Suite, 901 E 10th Avenue
Bay #22
City Hialeah, FL 33010

Suite, 901 E 10th Avenue
Bay #22
City Hialeah, FL 33010

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3434577**

Applied For
Not Applicable

Zip Country
USA

Zip Country
USA

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

GRADY, THOMAS R
720 FIFTH AVE S.
STE 200
NAPLES FL 34103

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME PEARSON, CHRISTOPHER L
STREET ADDRESS 4304 S DALE MABRY
CITY-ST-ZIP TAMPA FL 33611 ☐ Delete

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

TITLE STD
NAME PEARSON, LARRY R
STREET ADDRESS 4351 SANCTUARY WAY
CITY-ST-ZIP BONITA SPRINGS FL 34134 ☐ Delete

TITLE Pearson, Larry R.
NAME 13923 Palmilla Cir
STREET ADDRESS Dade City, FL 33525 ☒ Change ☐ Addition

TITLE VP
NAME BECKER, DOUGLAS S
STREET ADDRESS 311 S AUDUBON AVE
CITY-ST-ZIP TAMPA FL 33609 ☐ Delete

TITLE Becker, Douglas S.
NAME 8185 3RD Street N.
STREET ADDRESS St. Petersburg, FL 33702 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. 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 supplement 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, and I am empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03 (813) 831-4377
Date Daytime Phone #

CR2E034 (10/02)