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

PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000072302 (7)

## FILED Apr 20 1998 8:00am Secretary of State

MODA ROMANA, INC. Principal Place of Business Mailing Address 9571 HARDING AVE. 9571 HARDING AVE. SURFSIDE FL 33154 SURFSIDE FL 33154 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/18/1997 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0783533 Not Applicable 21 26 Sulte, Apt. #. etc. Suite. Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Ζiρ Country Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \square \text{No} No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SMOLEY, ROBERT A ESQ. 1820 NORTH UNIVERSITY DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33322 83 64 City Zip Code 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, typed or printed name of implicit red agent and talk if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12, 13. PRESIDENT Change DELETE Addition TITLE 1.1 TITLE MIRTHA M. HISTORD NAME 1.2 NAME 9571 HARDING ANE SURFEIDE, FI 33 STREET ADDRESS 1.3 STREET ADDRESS CITY - ST - ZIP 1.4 CITY-ST-ZIP VICE PRESIDENT DELETE Change Addition Addition TITLE 2.1 TITLE ELio Sau DIERI 2.2 NAME NAME 9571 HARDING HUR. SURFSIDE, FIL 3315 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE ☐ Change \_\_\_ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 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 so on an attachment with an address

OLONIATURE.

Daylor 1. Alth

4/14/98

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