FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 24, 2002 8:00 am Secretary of State P97000084722 DOCUMENT # 1. Entity Name 04-24-2002 90261 031 ***150.00 EUROPEAN TAILOR, INC. Mailing Address Principal Place of Business SHOPPES AT OAKLAND PARK (PLAZA) SHOPPES AT OAKLAND PARK (PLAZA) 7204 WEST OAKLAND PARK BOULEVARD 7204 WEST OAKLAND PARK BOULEVARD LAUDERHILL FL 33313 LAUDERHILL FL 33313 Principal Place of Business 3. Mailing Address opeay 11.01L DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number 65-0800685 Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **GOLDSTEIN, EDOUARD** Street Address (P.O. Box Number is Not Acceptable) SHOPPES AT OAKLAND PARK (PLAZA) 7204 WEST OAKLAND PARK BOULEVARD LAUDERHILL FL 33313 Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title it applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (9/01) ☐ Change ☐ Addition ☐ Delete TIT! F TITLE GOLDSTEIN, EDOUARD NAME 7204 WEST OAKLAND PARK BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERHILL FL 33313 CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME YELENCHAK, LUDMILA STREET ADDRESS STREET ADDRESS 7204 W. OAKLAND PARK BLVD. CITY-ST-ZIP CITY-ST-71P LAUDER HILL FL 33313 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME == NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP