2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # P98000028584 May 01, 2000 8:00 am 1. Entity Name Secretary of State MARIA'S FASHION CORPORATION 05-01-2000 90463 032 ***150.00 Mailing Address Principal Place of Business 2534 ROOSEVELT STREET 2534 ROOSEVELT STREET HOLLYWOOD FL 33020-2637 HOLLYWOOD FL 33020 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0824952 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name **GUTIERREZ. TITO** Street Address (P.O. Box Number is Not Acceptable) 2534 ROOSEVELT STREET HOLLYWOOD FL 33020 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 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 MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (9/99) Change ☐ Addition PD ☐ Delete TITLE TITLE **GUTIERREZ, TITO** MAME STREET ADDRESS STREET ADDRESS 2534 ROOSEVELT STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 Change Addition ☐ Delete TITLE TITLE NAME **GUTIERREZ. MARY** STREET ADDRESS STREET ADDRESS 2534 ROOSEVELT STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Change Addition Delete TITLE. NAME GUTIERREZ, MONICA STREET ADDRESS 2534 ROOSEVELT STREET STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Change ■ Addition Delete TITLE TITLE **GUTIERREZ, KARINA** NAME NAME STREET ADDRESS STREET ADDRESS 2534 ROOSEVELT STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Change Addition 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-ZIE CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

Daytime Phone #