FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 1. Entity Name MAPIA'S COLLECTION

FILED Jul 29, 2002 8:00 am Secretary of State 07-29-2002 90009 022 ***150.00

אמזיי	IN COLLECTION,	ţ.i.c.	V				
	DO NOT WRITE	IN THIS SP	ACE		• ·	10.70	
2. Principal F	Place of Business S. OCEAN DRIVE	3. Mailing Address 3800 S.OCEA	al Doute	-			
Suite, Apt. #, etc. Suite, Apt. #, etc.			14 DEINE		DO NOT WE	RITE IN THIS SPAC	CE
	•	APT 1101 City & State			A (CC) No. mala no.		Applied Co.
City & Stat	JWOOD, FL.	Hourywood	, FL.		4. FEI Number 65-087795ン		Applied For Not Applicable
^{Zip} 33 (Country USA	^{Zip} 33019	Country USA		5. Certificate of Status Desired	□ \$8.	.75 Additional Required
			Name		Name and Address of Curren	nt Registered Ag	ant
	DO NOT W	SEIFERTH					
DO NOT WRITE MAKIA Street Address (P.					O. Box Number is Not Acceptate	₹VE	
	IN THIS SP	1101					
			City U	PT OLLV	WOOD	FL	Zin Code 32019
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office o	r registere			23 (7)
SIGNATURE 1-18-02							
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE: F	Registered Agent signat	nté tednited A	vhen reinstating)	DATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) January 1: May 1 Fee is \$5 After May 1, Fee is \$5 Amended UBR is \$6) 1	10. Election Campaign F Trust Fund Contribut		\$5.00 May Be Added to Fees
11.	OFFICERS AND D	1		7			
NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT MARIA SEIFERTH 3800 S. OCEAN D HOLLY WOOD, FL.	RIVE APT 1101 33019	NAME STREET ADDRESS ĈITY ASTA ZIP ⁵				
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43 1 handby	certify that the information supplied with t	ais filing does not qualify for th	an everytien stat	od in Coal	tion 110 07/3)(i) Florida Statuta	6 (321.17 x 1 + x21.1	

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

SIGNATURE: 1 M SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

17-18-02 Date

954-455-3422 Dayrime Phone #

Attachment P98000043662

ACCOUNTING OFFICES OF

Shiffrin, Meisel & Co.

333 JERICHO TURNPIKE SUITE 136 JERICHO, NEW YORK 11753

> (516) 932-7757 FAX: (516) 932-7992

July 18, 2002

Department of State
Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, Fl. 32302-1500

Re: Maria's Collection, Inc. 3800 S. Ocean Drive Apt 1101 Hollywood, Fl. 33019 FEI Number 65-0877952 UBR-2001

Gentlemen,

My client has never received the Uniform Business Report for the year ended 12/3101. Apparently there has been confusion as to the mailing address of this report and therefore we respectfully request that you accept this filing as timely and abate any late filing penalties.

We are enclosing the Uniform Business Report with this letter correcting the mailing address so that future mailings are received on a timely basis. Thank-you very much for your cooperation regarding this matter.

Sincerely,

Lawrence M. Shiffrin

L M. Ship-

SHIFFRIN, MEISEL & CO.