

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0156960
FP

DOCUMENT # P98000075949

1. Entity Name

FASHIONS AND ALTERATIONS BY CHARLES, INC.



FILED

03 SEP 22 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

1829 US 41 N

NAPLES FL 34102

Mailing Address

1829 US 41 N

NAPLES FL 34102

2. Principal Place of Business

1811 US 41 NORTH.

3. Mailing Address

1811 US 41 NORTH.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

NAPLES Florida

City & State

NAPLES Florida

4. FEI Number

59-3533236

Applied For

Not Applicable

Zip

34102.

Country

Collier

Zip

34102.

Country

Collier

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, PETER C

1829 US 41 N

NAPLES FL 34102

7. Name and Address of New Registered Agent

Name

CHARLES WILLIAMS

Street Address (P.O. Box Number is Not Acceptable)

1811 US 41 NORTH.

City

NAPLES.

FL

Zip Code

34102.

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

9-18-03.

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

TITLE DTP
NAME WILLIAMS, PETER C
STREET ADDRESS 1829 US 41 N
CITY-ST-ZIP NAPLES FL 34102 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DTP.
NAME CHARLES WILLIAMS.
STREET ADDRESS 1811 US 41
CITY-ST-ZIP NAPLES FL. 34102. ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
400023306584
09/24/03--01065--012 **150.00

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

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

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

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-18-03. 239-261-3690.

Date Daytime Phone #

CR2E034 (4/03)



Fashions, Alterations & Tuxedos By Charles

1811 US 41 N, MOORINGS PLAZA, NAPLES FL, 34102

PH: 239 - 261- 3690 FAX: 239 - 261 - 4216

Florida Dept of State
Division of Corporations
Uniform Business Report
Tallahassee - FL

Dear Mrs. Dunlap

Thank you for taking the time to explain to me what I should do to fix this problem. I here by formally request that my corporation not be dissolved/revoked and any penalty be abated since we did not receive the notices sent to us by your department due to our address 1811 US 41 North and not 1829 US 41 North

Please find enclosed a check for \$150.00 as you requested for the Uniform Business Report.

Once again Mrs. Dunlap, Thank you for all your help

Charles Williams