

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000091286

1. Entity Name

SOBE SCANDALS, INC

Principal Place of Business

740 OCEAN DR.

MIAMI BEACH, FL. 33139

Mailing Address

740 OCEAN DR.

MIAMI BEACH, FL. 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0877450

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

STEINBERG, PAUL B
767 ARTHUR GODFREY RD
MIAMI BEACH, FL. 33140

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. MANAGING MEMBERS/MEMBERS

10.

ADDITIONS/CHANGES

TITLE PD
NAME GONZALES, PASCAL CAMILLE
STREET ADDRESS 740 OCEAN DR
CITY-ST-ZIP MIAMI BEACH, FL. 33139

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

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

04/30/02

Date

Daytime Phone #

CR2E083 (11/00)