## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

CHILSHM BOSIN	E99 KEPUKI	(UBK)			
DOCUMENT # P 99 0 0	, .	SECRETARY O	) DE STATE RPORATIONS		
Moda fashions, Inc.			02 FEB -8 PM 4: 00		
DO NOT WRITE IN THIS SPACE			0000049	0000049171903	
2. Principal Place of Business  E. Flager  Suite, Apt. #, etc.  3. Mailing Address  Suite, Apt. #, etc.		igler St.	-02/13/0 ****300 DO NOT WRITE		
City & State / FL Zight 14   Country S	City & State  May FL  Zip 33 13   Country US		FEI Number 59-355     Certificate of Status Desired	5 9-355 US Not Applicable  5 Certificate of Status Desired	
19191 05	7 3-1-31-		7. Name and Address of Courset Be	Fee Required	
DO NOT W IN THIS SI	7. Name and Address of Current Registered Agent Name  Name  Name  Note  Note  Street Address (P.O.Box Nyimber is Not Acceptable)  City  M. A.W.  FL ZipCode				
8. The above named entity submits this statement for	or the purpose of changing its re		<u>am</u>		
SIGNATURE Signature, typed or printed name of registered agent	Chagay	Registered Agent signature rec	l	2 -4-07 DATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After May 1, Amended Make Check Payable	y 1 Fee is \$150.00 Fee is \$550.00 UBR is \$61.25 to Department of	<ol> <li>Election Campaign Finance</li> <li>Trust Fund Contribution.</li> </ol>	cing \$5.00 May Be Added to Fees	
TITLE DAGLERS AND	DIRECTORS				
NAME GLA RAZINA		TITLE NAME		R2E034B (12/01)	
STREET ADDRESS 117 # Gla ale, St.		STREET ADDRESS		, (5	
CITY-ST-ZIP Many 1 3313		CITY-ST-ZIP	·	426	
TITLE DIRECTOR .		TITLE		325	
NAME Chagay Rozer		NAME OTREST ADDRESS	•	5	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP			
TITLE TITLE		TITLE		······································	
NAME		NAME	•		
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	DO NOT W	RITE	
TITLE		CITY-ST-ZIP		*	
NAME		TITLE NAME	IN THIS SI	PACE	
STREET ADDRESS		STREET ADDRESS		*	
CITY-ST-ZIP		CITY-ST-ZIP -	•	o'.	
TITLE		TITLE			
NAME STREET ADDRESS		NAME STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP		*	
TITLE	<del></del>	TITLE			
NAME .		NAME			
STREET ADDRESS  CITY-ST-2IP		STREET ADDRESS CITY-ST-ZIP	· A.		
	his filing does not qualify for the		Section 110 07/2V/) Clarida Castras 11	ther portify that the inferred-ti	
13. I hereby certify that the information supplied with indicated on this report or supplemental report of of the corporation or the receiver or trustee con- attachment with an address with all others or	true and accurate and that my sowered to execute this report a owered.	signature shall have the street in street in signature shall have the street in street	he same legal effect as if made under oath r 607, Florida Statutes; and that my name	that I am an officer or director appears in Block 11 or on an	

LARAY ROZAN

SIGNATURE:

## Moda Fashions, Inc. 117 E. Flagler Street Miami, FL 33131

2-4-02

Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: P99000004179

To Whom It May Concern:

Please be advised that the mailing address that you are showing for my corporation has changed. Because of this, I never received my annual renewal form and my corporation has been administratively dissolved.

Enclosed you will find a blank UBR that I have filled out with my new address. I have also included the filing fees for last year and for this year. Please reinstate my business and update my information.

Thank you,

Chagay Rozen
Director

91P