

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000006514

1. Entity Name

ETTIS SWIMWEAR, INC.

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90075 032 ***150.00

Principal Place of Business

Mailing Address

101 N. OCEAN DRIVE, #130
 HOLLYWOOD FL 33321

101 N. OCEAN DRIVE, #130
 HOLLYWOOD FL 33019-1748

2. Principal Place of Business

3661 Farragut Street

Suite, Apt. #, etc.

3. Mailing Address

3661 Farragut Street

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
 Hollywood, Florida

Zip
 33021

Country

City & State
 Hollywood, Florida

Zip
 33021

Country

4. FEI Number

65-0889813

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NAHON, ESTHER
 3661 FARRAGUT STREET
 HOLLYWOOD FL 33021

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. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 NAHON, ESTHER
 3661 FARRAGUT STREET
 HOLLYWOOD FL 33021 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Delete

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

ESTHER NAHON

X 5.1.2000

X 954 923 5724

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

C-32E034 (9/99)