

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000012820

1. Entity Name

TATTOO WEAR, INC.

**FILED**  
**Apr 24, 2000 8:00 am**  
**Secretary of State**

04-24-2000 90065 031 \*\*\*150.00

Principal Place of Business

5300 NW 33 AVE STE 117  
FT LAUDERDALE FL 33309

Mailing Address

5300 NW 33 AVE STE 117  
FT LAUDERDALE FL 33309-6318

2. Principal Place of Business

3. Mailing Address

5200 N.E. 12 AVE  
Suite, Apt. #, etc.

5200 N.E. 12 AVE  
Suite, Apt. #, etc.

City & State

OAKLAND PARK FL

City & State

OAKLAND PARK FL

4. FEI Number

65-0893966

Applied For

Not Applicable

Zip

33334

Country

Zip

33334

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

APELBOIM, DANIEL  
5300 NW 33 AVE STE 117  
FT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name APELBOIM, DANIEL

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

5200 N.E. 12 AVE

City OAKLAND PARK

FL

Zip Code 33334

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

*Danny Apelboim*

4/17/00

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

TITLE D  
NAME APELBOIM, DANIEL  
STREET ADDRESS 255 CODRINGTON DR  
CITY-ST-ZIP FT LAUDERDALE FL 33308 ☐ Delete

TITLE TREASURER  
NAME BENJAMIN GUETA  
STREET ADDRESS 6519 ROCKETT CLUB DR.  
CITY-ST-ZIP LAUDERHILL FL 33319 ☐ Delete

TITLE SECRETARY  
NAME YAIR SHATIL  
STREET ADDRESS 3400 SPRING BLUFF  
CITY-ST-ZIP LAUDERHILL, FL 33319 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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:

*Danny Apelboim*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/00 (954) 202-9220  
Date Daytime Phone #

CR2E034 (9/99)