

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000038113

1. Entity Name

UNI-FUN WEAR, INC.

Principal Place of Business

3600 S STATE ROAD 7 STE 210  
MIRAMAR FL 33023

Mailing Address

3600 S STATE ROAD 7 STE 210  
MIRAMAR FL 33023-5288

2. Principal Place of Business

1505 N.W. 203 STREET

3. Mailing Address

1505 N.W. 203 STREET

Suite, Apt. #, etc.

MIAMI, FLORIDA

Suite, Apt. #, etc.

MIAMI, FLORIDA

City & State

City & State

Zip

33169

Country

U.S.A

Zip

33169

Country

U.S.A

6. Name and Address of Current Registered Agent

DIXON, NICOLE  
1505 NW 203 STREET  
MIAMI FL 33169

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. 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 ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

CEO/DESIGNER  
GUILENE DIXON  
1505 N.W. 203 STREET  
MIAMI, FL 33169

TITLE ☐ Change ☒ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

LEGAL COUNSEL/V.P. OF MARKETING  
NICOLE DIXON  
1505 N.W. 203 STREET  
MIAMI, FL 33169

TITLE ☐ Change ☒ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

V.P. OF OPERATIONS  
ELIZABETH SANCHEZ  
2101 WEST 52ND ST; APT #202  
Hialeah, FL 33016

TITLE ☐ Change ☒ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

CHIEF FINANCIAL OFFICER  
BOBIE DIXON  
1505 N.W. 203 STREET  
MIAMI, FL 33169

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

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:

Guilene M. Dixon (Guilene M. Dixon)

4/5/00 (305) 652-8209

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)