

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000054523

1. Entity Name

F V FASHIONS, INC.

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

04-26-2000 90151 031 ***150.00

Principal Place of Business

Mailing Address

~~411 NW 4 ST #B~~
~~MIAMI FL 33128~~

~~411 NW 4 ST #B~~
~~MIAMI FL 33128-1609~~

2. Principal Place of Business

8484 S.W. 24th STREET

3. Mailing Address

8484 S.W. 24th STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

Country

33155

Zip

Country

33155

4. FEI Number

65-0926648

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

UGARTE, FABRICIO

411 NW 4 ST #B

MIAMI FL 33128

Name

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

4155 S.W. 92 AVENUE

City

MIAMI

FL

Zip Code

33165

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
PTD
UGARTE, FABRICIO
~~411 NW 4 ST #B~~
MIAMI FL 33128

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P, SEC, T, D.
4155 SW 92ND AVE
MIAMI, FL 33165

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
ESPINOZA, MARIA
411 NW 4 ST #B
MIAMI FL 33128

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V, DIRECTOR
UGARTE, RITA
4155 S.W. 92 AVE
MIAMI, FL 33165

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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CITY-ST-ZIP

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
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 which is other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/00 (305) 485-8993

Date

Daytime Phone #

CR2E034 (9/99)