2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # FIL FD P99000062163 1. Entity Name 00 OCT -4 PM 3: 36 NITHA PEREYRA FASHION CORP. SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 141 N.E. 3rd AVE, 6th FL. MIAMI, FL 33132 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For . . . · Not Applie Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **NITHA PEREYRA** Street Address (P.O. Box Number is Not Acceptable) 141 N.E. 3rd AVE. 6th FL MIAMI, FL 33132 City 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 he of registered agent and title il applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete ☐ Change P/DNAME NAME MARGARITA M. PEREYRA STREET ADDRESS STREET ADDRESS 141 NE 3rd AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33132 TITLE ☐ Delete V/D TITLE NAME ANDREA V. PEREYRA NAME 700003459487 STREET ADDRESS 141 NE 3rd AVE. STREET ADDRESS __01105-CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP $\overline{\mathbf{n}}$ TITLE ☐ Delete TiTt F Change MARCELO E. LENAR NAME NAME 141 NE 3rd AVE. STREET ADDRESS STREET ADDRESS MIAMI, FL 33132 CITY-ST-ZIP CITY-ST-ZIP DITER ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change _ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change NAME NAME

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 changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daylime Phone # . .

C&:

NITHA PEREYRA FASHION CORP. DOC.#P9900062163

UNIFORM BUSS. REPORT SEC.

ENCLOSED YOU WILL FIND THE UNIFORM BUSINESS REPORT FORM ALONG WITH A CHECK FOR \$150.00 PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE ADDRESS LISTED IN THE ANNUAL REPORT.

SINCERELY.

-MARGARITA M.PEREYRA

PRESIDENT