

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
May 09, 2003 8:00 am  
Secretary of State

05-09-2003 90144 036 \*\*\*150.00

0365979  
AV 6/3/99

DOCUMENT # P99000071282

1. Entity Name  
JAN DRESS FOR LESS, INC.



Principal Place of Business - 9035 W SUNRISE BOULEVARD - PLANTATION FL 33322 US  
Mailing Address - 9035 W SUNRISE BOULEVARD PLANTATION FL 33322 US



2. Principal Place of Business  
715 N BEL AIR DRIVE  
Suite, Apt. #, etc.  
Plantation - FL

3. Mailing Address  
715 N BEL AIR DRIVE  
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State  
33317  
Zip  
Country  
33317 - US

4. FEI Number 65-0940156  
Applied For  
Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
POSADA, RODRIGO  
715 N BEL AIR DRIVE  
PLANTATION FL 33317

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RINCONES, ANDREA 9035 W SUNRISE BLVD PLANTATION FL 33322 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BOLIVAR, RAMIRO 9035 W SUNRISE BLVD PLANTATION FL 33322 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GROSSOR, JUDITH 911 NW 85 TERRACE #131 PLANTATION FL 33324 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RINCONES, RAFAEL 911 NW 85 TERRACE #131 PLANTATION FL 33324 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ANDREA RINCONES 715 N BEL AIR DRIVE PLANTATION FL 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 05.06.03 (954) 817-1726  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

Attachment

80117763  
#799000071282

SENDING THIS LEATHER .

I WOULD LIKE TO APOLOGISE FORWARD. REGARDING  
THE PAYMENT THAT WAS DUE MAY I  
THE REASON, FOR THE LATE PAYMENT IS  
BECAUSE, I WAS TRAVELING FOR MEDICAL'S  
APPOINTMENTS OUT OF USA

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I SEND THE PAYMENT TODAY  
WEDNESDAY 7/2003.

YOURS TRULY.

ANDREA RINCONES.

President JAN DRESS FOR LACS I.N.C.

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