UN	IFORM RUSING	ISS REPORT		21		3 90142 027 ** S36000	*150.00
DOCUMENT # S36000					FILED S36000		
1. Entity Name ROSE TAFT COUTURE INC.							
LOSE IN	FI COUTURE INC.				1 MA 06 MUL 80		
Principal Plac	ce of Business	Mailing Address	V	WILL STREET	SECRETARY OF S TALLAHASSEE, FL	JATE ORIDA	
5850 MIAMI U	AKES DRIVE	5850 MIAMI LAKES DRIVE	850 MIAMI LAKES DRIVE			. CARTON	
MIAMI LAKES	FL 33014	MIANI LAKES FL 33014					-
2 Delegies I	Place of Business					•	
, a. rincipair	INCO OF DESCRIPS	3. Mailing Address			` 		
Suite, Apt. #, etc. Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANG		GES 05	
City & State		City & State			4. FEI Number 65-0280849 Applied For Not Applicable		
Zip Country		Zip Country			5. Certificate of Status Desired Security Securi		
<u> </u>	6. Name and Address of Current	Registered Agent			7. Name and Address of New F		
MARCIA TAFT				Name			
5850 MIAMI LAKES DRIVE				Street Address (P.O. Box Number is Not Acceptable)			
MIAMI LAK	ES FL 33014						
	· · · · · · · · · · · · · · · · · · ·		City				Code
8. The above the obligat	named entity submits this statement for lions of registered agent.	the purpose of changing its re	egistered office	or registered	agent, or both, in the State of Flo	rida. I am famillar i	with, and accept '
SIGNATURE							
116 T.Z.F	TLE NOW III FEE IS \$150.00						
Aner May 1, 2003 Fee will be \$550.00; Make Check Payable to Florida Department of State :					9. Election Campaign Fir Trust Fund Contribution		55.00 May Be
10.	OFFICERS AND		11.	~	ADDITIONS/CHANGES TO OFF		
	IPTO ITAFT, MARCIA	☐ Delete	TITLE NAME	1		☐ Cha	nge 🔲 Addition 1 8
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NAME EXPORT ADDRIVE	[NAME .	}			
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TITLE		☐ Deleta	TITLE			☐ Cha	nge 🗆 Addition
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CITY-ST-ZIP	,	• • •	CITY-ST-ZIP	<u> </u>			· _ }
TITLE		☐ Delete	TITLE NAME]		Char	nge . Addition
NAME STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that this information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the composition 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.							
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SIGNATURE: SIGNATURE REPUBED 4/1/0> 121-1126							

ROSE TAFT COUTURE, INC. 5850 MIAMI LAKES DRIVE MIAMI LAKES, FLORIDA 33014 (305) 826-6026

June 25, 2003

Florida Department of State
PO Box 6327
Tallahassee, Florida 32314

Re: 6/16/03 90142-027-\$150

Dear Gentlemen:

According to our records, we filed our 2003 Uniform Business Report on time back in early April. However, there was no record by the Florida Department of State that substantiates that the report was physically received. Within the past several weeks, we issued a new check along with a copy of our completed form. This time you acknowledged receipt of the report, though Rose Taft was issued a late fee of \$400.

Per my discussion with a representative in your office, they stated to me to inform the department of our original intent to file the report on a timely basis. Therefore, I would very much appreciate if you could waive this \$400 penalty due to the consequences listed above.

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Sincerely,

Michael Mullne