

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 18, 1994.
AMOUNT DUE ON OR BEFORE 6/15/94: \$225 (IF DISSOLVED, AMOUNT DUE TO RESTATE: \$375)

CORPORATION
ANNUAL REPORT

1994 1995



FLORIDA DEPARTMENT OF STATE
John Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S38000 (3)

1. Corporation Name

EUROPEAN WOMEN'S FASHIONS, INC.

Mailing Address

1450 Madruga Ave., #406
Coral Gables, FL 33146

Principal Place of Business

8888 S.W. 136th St., #434
Miami, FL 33176

Indicate in which state the corporation is organized in any way, use through, internet, information and other connection below.

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
3/1/91

3a. Date of Last Report

4. FEI Number
65-0260080

Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75

6. Election Campaign
Financing Trust
Fund Contribution ☐

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Mailing Address

21 State, Apt. # etc.

2a. Principal Place of Business

26 State, Apt. # etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Dennis R. Haber, Esq.
1450 Madruga Ave., #406
Coral Gables, FL 33146

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE

Signature (print or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P/S/T/D
12 NAME	Sam D'Angelo
13 STREET ADDRESS	1450 Madruga Ave., #406
14 CITY - ST - ZIP	Coral Gables, FL 33146
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
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54 CITY - ST - ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

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5/1/95
MSX

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sam D'Angelo

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(Signature) (Print Name)