

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **S58330**

1. Entity Name
EXOTIC SILK FANTASIES, INC.

FILED

02 OCT 16 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**340 S. TAMiami TRAIL
NOKOMIS FL 34275
US**

Mailing Address

**P. O. BOX 15121
SARASOTA FL 34277
US**

2. Principal Place of Business

340 S. TAMiami TR
Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 15121
Suite, Apt. #, etc.

City & State

NOKOMIS, FL 34275

City & State

SARASOTA, FL

Zip

Country

34275 USA

Zip

Country

34277 USA

4. FEI Number **65-0272894**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BOUAZZAOU, ADIL
4532 OCEAN BLVD.
UNIT 210
SARASOTA FL 34242**

7. Name and Address of New Registered Agent

Name **BOUAZZAOU, ADIL**
Street Address (P.O. Box Number is Not Acceptable)
**174 GOLDEN GATE POINT
UNIT 52
SARASOTA FL 34236**

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 **ADIL BOUAZZAOU (President)**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/30/02

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **P** ☒ Delete
NAME **BOUAZZAOU, ADIL**
STREET ADDRESS **4013 HIGEL AVE**
CITY-ST-ZIP **SARASOTA FL**

TITLE **ADIL BOUAZZAOU** ☒ Change ☐ Addition
NAME **174 GOLDEN GATE POINT**
STREET ADDRESS **UNIT 52**
CITY-ST-ZIP **SARASOTA, FL 34236**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **300008368063--4**
STREET ADDRESS **-10/15/02--01017--001**
CITY-ST-ZIP ******150.00 ****150.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

ADIL BOUAZZAOU
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ADIL BOUAZZAOU 9/30/02 (941) 426-1803

CR2E034 (4/02)

August 30, 2002

Florida Department of Revenue
5050 W. Tennessee Street
Tallahassee, Fl. 32399

Re: Exotic Silk Fantasies, Inc.
S58330

Gentleman:

Enclosed please find the 2002 Uniform Business report for Exotic Silk Fantasies, Inc.
and a remittance of \$150.00. We respectfully request that you abate the \$400.00 penalty
due to reasonable cause.

It is my understanding from my previous bookkeeper that we never received the original
uniform business report.

Please correspond to our office as to the disposition of this matter.

Very truly yours,


Adil Bouazzaoui