

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 13, 2006 8:00 am
Secretary of State

07-13-2006 90020 043 ***150.00

DOCUMENT # V12959

1. Entity Name
RADICAL FASHIONS OF FORT LAUDERDALE, INC.



Principal Place of Business

**3161 W. OAKLAND PRK BLVD
SUITE #705
FORT LAUDERDALE, FL 33311 US**

Mailing Address

**3161 W. OAKLAND PRK BLVD
SUITE #705
FORT LAUDERDALE, FL 33311 US**

00044308



03032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3107997

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CHEHAB, BILAL
3161 W. OAKLAND PRK BLVD
SUITE #705
FORT LAUDERDALE, FL 33311**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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
**DP
CHEHAB, BILAL
3161 W. OAKLAND PRK BLVD #705
FORT LAUDERDALE, FL 33311**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Bilal Chehab
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-06
Date

954-739-1663
Daytime Phone #

PS * Due to hurricane Wilma
ATTACHMENT ~~50022358~~
#V12959
We just open back the
Business and just getting
the mail that's why I am
mailing this form late
Business was closed from
October thru June-30 + have
for the Corporation.

Bilal Chhab