## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # V58151  1. Entity Name				Secretary of State
CLASSIC	CLOTHIERS, INC.			07-20-2001 90007 044 ***150.00
Principal Place of Business 1105 GUAVA ISLE FT. LAUDERDALE FL 33315 US		Mailing Address 1105 GUAVA ISLE FT. LAUDERDALE FL 33315 US		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State		City & State		4. FEI Number NOT APPLICABLE Applied For   ✓ Not Applicable
Zìp ————	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current F	Registered Agent	Name	7. Name and Address of New Registered Agent
OFCE F		ورائي دارا البراعام ودماعيات سامحت الركيف المتاد	Name	
SIEGEL, FRED 1105 GUAVA ISLE			Street Address	ss (P.O. Box Number is Not Acceptable)
FT. LAUD	ERDALE FL 33315	•		
ţ.			City	FL Zip Code
8. The above	named entity submits this statement for	the purpose of changing its r	egistered office or registe	stered agent, or both, in the State of Florida.
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signature require	uired when reinstating) DATE
Tax filing requirement and elects to do so After September 12, 2		! FEE IS \$550.00 2001 Fee will be \$750 le to Department of Sta		
11.	OFFICERS AND [	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADORESS CITY-ST-ZIP	P SIEGEL, FRED 1105 GUAVA ISLE FT. LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS* CITY-ST-ZIP	and the second s	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY'-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS City-St-Zip	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE ' NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	' ☐ Change ☐ Addition
indicated of the cor	on this report or supplemental report is t	true and accurate and that my wered to execute this report a	v signature shall have the	Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director 307, Florida Statutes; and that my name appears in Block 11 or Block 12 if

7/9/01

Attachnent

1105 Guava Isle Ft. Lauderdale, FL 33315

CLASSIC CLOTHIERS, INC # V 58/5/

July 9, 2001

**Division of Corporations** PO Box 1500 Tallahassee, FL 32302 Uniform Business Report Filings

To Whom It May Concern:

This is in regard to the filing fee for Classic Clothiers, Inc. We did not receive the first filing notice; due to this confusion we incurred a late fee. We are sending the UBR form along with a check for the original filing fee amount. We apologize for the delay and appreciate your cooperation in this matter. If there are further questions pertaining to this issue please email us at fredsiegel@earthlink.net

Sincerely,

Fred Siegel President Classic Clothiers, Inc.

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