

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000071930

**Entity Name:** URBAN CHICQUE, INC.

**Current Principal Place of Business:**

11609 LONGWOOD KEY DR E  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

11609 LONGWOOD KEY DR E  
JACKSONVILLE, FL 32218-3473 US

**FEI Number:** 92-0824236

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CROSS, SHERVONNE  
11609 LONGWOOD KEY DR E  
JACKSONVILLE, FL 32218 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P/D  
Name CROSS, SHERVONNE  
Address 11609 LONGWOOD KEY DR E  
City-State-Zip: JACKSONVILLE FL 32218

Title VP/T  
Name CROSS, SHERVONNE  
Address 11609 LONGWOOD KEY DR E  
City-State-Zip: JACKSONVILLE FL 32218

Title S  
Name CROSS, SHERVONNE  
Address 11609 LONGWOOD KEY DR E  
City-State-Zip: JACKSONVILLE FL 32218

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHERVONNE L. CROSS

OWNER/CEO

04/01/2024

Electronic Signature of Signing Officer/Director Detail

Date