

Uniform Commercial Code — Financing Statement — Form UCC-1

1. Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose filing fee.
4. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification number or social security number.

Prepaid account number _____

1. Debtor (if individual, last name first) and address:

Lingerie Plus Inc.

Lily of France/Carol Hochman
Riverfront Factory Outlet
1 Riverfront Plaza, Space #102
Lawrence, Kansas 66044

FEIN 0 4 - 3172452

or SSN _____

Debtor (if individual, last name first) and address:

FEIN _____

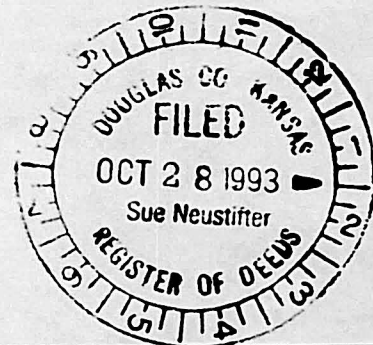
or SSN _____

2. Secured Party and address (there may be more than one):
(Type information inside gray area)

Bestform Foundations Inc.
38-01 47th Avenue
Long Island City, New York 11101

For filing officer

9 007524



3. Assignee and address if applicable

4. Mark, if applicable: ☒ [X] Products of collateral are also covered ☐ [] The debtor is a transmitting utility

5. (a) This financing statement covers the following types (or items) of property: (Describe)

See attached hereto.

(b) If collateral is crops, the above described crops are growing or are to be grown on: (Describe real estate)

(c) If applicable, the above (goods are to be come fixtures on:) (timber is standing on:) (minerals or the like, including oil and gas, or accounts will be financed at the wellhead or minehead of the well or mine located on:) (Legal description of real estate)

Name of record owner: _____

6. If filing without debtor signature items a, b, c or d must be marked:

- a. ☐ [] Collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location is changed to this state.
- b. ☐ [] Collateral is proceeds of the original collateral in which a security interest was perfected
- c. ☐ [] Collateral as to which the filing has lapsed.
- d. ☐ [] The filing covers collateral acquired after a change of name identity or corporate structure of debtor

Lingerie Plus Inc.

By: _____

Signature of Debtor
Jack Hellman, President

Signature of Secured Party (or assignee)

Signature of Debtor

Signature of Secured Party (or assignee)

RETURN TO:
PRENTICE HALL

P.O. BOX 1110

ALBANY, N.Y. 12201

Form UCC-1 Form approved by Kansas Secretary of State

FILING OFFICER

Rev. 6-93

600075

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