


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 14, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # 594493</b> 1. Entity Name PEEPLES CLOTHING AND SHOE STORE, INC.	
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Principal Place of Business 4140 COATS ROAD ZEPHYRHILLS FL 33541 US	Mailing Address P.O. BOX 1058 ZEPHYRHILLS FL 33539 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E034 (10/07)

4. FEI Number <b>59-1870345</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>PEEPLES, ERNEST L</b> <b>4140 COATS ROAD</b> <b>ZEPHYRHILLS FL 33541</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>	

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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing **\$5.00** May Be  
 Trust Fund Contribution.  Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete PEEPLES, ERNEST 4140 COATS ROAD ZEPHYRHILLS FL
TITLE	VST <input type="checkbox"/> Delete PEEPLES, JIMMIE 4140 COATS ROAD ZEPHYRHILLS FL
TITLE	D <input type="checkbox"/> Delete PEEPLES, JIMMIE 4140 COATS ROAD ZEPHYRHILLS FL
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition U00000893617 04/23/08-80113-010 150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Jimmie Peoples Jimmie Peoples 4/8/2008 813 782-2989  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #