

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J84719 (0)

1. Corporation Name

JACY'S BOUTIQUE, INC.



Principal Place of Business

245 NORTH OCEAN BOULEVARD
1129 BOCA COVE LANE
DEERFIELD BEACH FL 33441
US

Mailing Address

% BRENDA C. STONE
1129 BOCA COVE LANE
HIGHLAND BEACH FL 33487

3. Date Incorporated or Qualified
07/29/1987

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number
59-2838477

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STONE, BRENDA C.
1129 BOCA COVE LANE
HIGHLAND BEACH FL 33487

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, if not otherwise applicable

Printed Name of Agent, if not otherwise applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME STONE, BRENDA C.
STREET ADDRESS 245 NORTH OCEAN BOULEVARD
CITY-ST-ZIP DEERFIELD BEACH FL ☐ DELETE

TITLE D
NAME STONE, BERNARD H.
STREET ADDRESS 245 NORTH OCEAN BOULEVARD
CITY-ST-ZIP DEERFIELD BEACH FL ☐ DELETE

TITLE D
NAME STONE, JAMES B.
STREET ADDRESS 245 NORTH OCEAN BOULEVARD
CITY-ST-ZIP DEERFIELD BEACH FL ☐ DELETE

TITLE D
NAME RESNIK, MARCY S
STREET ADDRESS 245 N OCEAN BLVD
CITY-ST-ZIP DEERFIELD BEACH FL 33441 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP ☒ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP ☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP ☒ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP ☒ Change ☐ Addition

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/16/96 407-750-1558

CR2E034 (12/95)