2013 FOR PROFIT CORPORATION FILED ANNUAL REPORT DOCUMENT # P99000109489 2013 APR 11 PM 3:27 1. Entity Name BIJOU, INC. Principal Place of Business Mailing Address 1835 E HALLANDALE BCH BLVD 6065 NW 167 STREET B-22 MIAMI, FL 33015 HALLANDALE, FL 33009 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 11262013 Chg-P CR2E034 (12/11) Applied For City & State City & State 4. FEI Number 65-1001554 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HEPNER, DENISE Street Address (P.O. Box Number is Not Acceptable) 1835 E HALLANDALE BEACH BLVD 186 HALLANDALE, FL 33009 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 27, 2013 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. me D ☐ Delete TITLE ☐ Change ☐ Addition HEPNER, DENISE NAME NAME 500254526865 STREET ADDRESS 1835 E HALLANDALE BCH BLVD #186 STREET ADDRESS 12/09/13--01005--002 **150.00 CITY-ST-ZIP HALLANDALE, FL 33009 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete [7] Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SY-ZIF CITY-ST-ZIP ☐ Delete ME ☐ Change Addition TITLE NAME NAME S. HAWKES STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIF DEC 1 7 2013 Delete TITLE TILE ☐ Change ☐ Addition NAME NAME EXAMINER STREET ADDRESS STREET ADDRESS

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I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 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 attackment with an address, with all other like empowered.

Denise He

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SIGNATURE:



Corporations Payments Tools Activity

rvarnadore ~

Information

Annual Report Filing History

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Session

Transaction ID	Description	Filing Stage
p99000109489-118e89ab- a8d9-442d-9fb3- a8c208a0564a	Session file for p99000109489 with last modified date_of 4/11/2013 10:49:08 AM Eastern Standard Time	PaymentPage
p99000109489-f1cdfe92-df9b- 46df-b3e5-af8b8849e691	Session file for p99000109489 with last modified date of 9/13/2013 3:57:58 PM Eastern Standard Time	Edit

Transactions

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P99000109489-a1cb5177-253a-45e8- bb1e-400749632277	P99000109489	0	2	4/26/2011 12:00:00 AM
P99000109489-dff44899-d155-49af- 95d1-ea579b42ce0a	P99000109489	0	2	4/5/2010 12:00:00 AM

