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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000066733 (5)

BETH'S BOUTIQUE, INC.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-Z#F

Principal Place of Business Mailing Address 1300 3RD ST., SO. 1870 4TH ST., \$0. Suite 202B NAPLES FL 39940-DO NOT WRITE IN THIS SPACE NAPLES FL -00940-3. Date Incorporated or Qualified 09/20/1993 2. Principal Place of Business 2a. Madino Address 4. FEI Number Applied For 26 65-0443235 Not Applicable Suite, Apl. #, etc Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 34102 Country Country 8. This corporation owes or has paid the current year Intangible 34102 25 30 Personal Property Tax due June 30. Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RESSLER, BETH 1870 4TH ST., SO. 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33940 34102 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE. Signature, typed or printed name of registered agent and the if applicable (NOTL Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ΡĎ DELFTE TITLE 1.1 Tifle Change Addition NAME **Ressler**. Beth 1.2 NAME 1870 4TH ST., SO. STREET ADDRESS 1.3 STREET ADORESS NAPLES FL CITY-ST-ZIP 1.4 CITY-ST-2IP NAPLET PL 34102 DELETE TITLE Change 2.1.711LE Addition NAME 2.2 NAMÉ STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZiP 2 4 City - St - ZiP TITLE DELETE 3111111 ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition

6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or on an attachment with an address

4. 2 NAME

5.1 TITLE

5.2 NAME

6 1 111LF

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6 3 STREET ADDRESS

5.4 CITY - \$1 - 7IP

4.4 CITY - S1 - ZIP

DELETE

DELETE

☐ Channe

☐ Change

Addition

Addition

FILED

May 28 1998 8:00am

Secretary of State