

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000008612

FILED
Apr 07, 2004
Secretary of State

Entity Name: MONIQUE'S BOUTIQUE AND FINER CONSIGNMENT INC.

Current Principal Place of Business:

320 N. ATLANTIC AVENUE
8A
COCOA BEACH, FL 32931 US

New Principal Place of Business:

Current Mailing Address:

320 N. ATLANTIC AVENUE
8A
COCOA BEACH, FL 32931 US

New Mailing Address:

FEI Number: 59-3433570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OBRIEN, JOAN M
2226 TWILIGHT CIR
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OBRIEN, JOAN M
Address: 333 NO. ATLANTIC AVE #103
City-St-Zip: COCOA BCH, FL 32931

Title: V () Delete
Name: SALAFIA, VIOLA
Address: 2609 VENTURA CIRCLE
City-St-Zip: W MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: DERWITSCH, ADOLF
Address: 2226 TWILIGHT CIRCLE
City-St-Zip: MELBOURNE, FL 32935

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOAN M. O'BRIEN

P

04/07/2004

Electronic Signature of Signing Officer or Director

Date