

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158561

Entity Name: BIKINI BRAZIL FASHION INC

FILED  
Aug 14, 2006  
Secretary of State

## Current Principal Place of Business:

5950 LAKEHURST DR  
230  
ORLANDO, FL 32819 US

## Current Mailing Address:

5950 LAKEHURST DR  
230  
ORLANDO, FL 32819 US

## New Principal Place of Business:

6450 ALCALDE CT  
105  
ORLANDO, FL 32835 US

## New Mailing Address:

6450 ALCALDE CT  
105  
ORLANDO, FL 32835 US

FEI Number: 20-1898063

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARSON, CAROLINE G  
5950 LAKEHURST DR  
246  
ORLANDO, FL 32819 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ALTMAN, SILVIO  
Address: 2302 MIDTOWN TER 1228  
City-St-Zip: ORLANDO, FL 32839 US

Title: VP ( ) Delete  
Name: ALTMAN, DENISE MARIA R  
Address: 2302 MIDTOWN TER 1228  
City-St-Zip: ORLANDO, FL 32839 US

Title: VP ( ) Delete  
Name: SCATES, LANCE S  
Address: 2302 MIDTOWN TER 1228  
City-St-Zip: ORLANDO, FL 32839 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ALTMAN, SILVIO  
Address: 6450 ALCALDE CT UNIT 105  
City-St-Zip: ORLANDO, FL 32835 US

Title: VP (X) Change ( ) Addition  
Name: ALTMAN, DENISE MARIA R  
Address: 6450 ALCALDE CT UNIT 105  
City-St-Zip: ORLANDO, FL 32835 US

Title: OFF (X) Change ( ) Addition  
Name: SCATES, LANCE S  
Address: 6450 ALCALDE CT UNIT 105  
City-St-Zip: ORLANDO, FL 32835 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LANCE S SCATES

OFF

08/14/2006

Electronic Signature of Signing Officer or Director

Date