

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000078045

**Entity Name:** HANDBAG SHAPER INC

**Current Principal Place of Business:**

100 KINGS POINT DR  
1217  
NORTH MIAMI BEACH, FL 33160

**Current Mailing Address:**

100 KINGS POINT DR  
1217  
NORTH MIAMI BEACH, FL 33160 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VILLA, MIRTA AMRS  
100 KINGS POINT DR  
1217  
NORTH MIAMI BEACH, FL 33160 US

*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

**Officer/Director Detail :**

Title P  
Name VILLA, MIRTA AMRS  
Address 100 KINGS POINT DR  
1217  
City-State-Zip: NORTH MIAMI BEACH FL 33160

*I hereby 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 all other like empowered.*

**SIGNATURE:** MIRTA A VILLA

P

04/29/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date