2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 207550 1. Entity Name FASHION FURS, INC.		J			Feb 13, 2006 08:00 AM Secretary of State					
	-									
Principal Plac	ce of Business	Mailing /	ddress		{	1				
SAINT PETERSBURG FL 33712		- 1600 G CLEARI US	TULF BLVD. APT 1115 WATER FL 33767							
2. Principal Place of Business 3. Mailin		Address			· · · ·	INC NEW COLK (EBB) BHELL	iriit adil didil didil	E/E// E/E// E/E// E/	#11 5#1 (4 1 6B)	
Suite, Apt. #, etc.		Suite,	pt. #, etc.			1s	MOORE	CR2E034	(10/05)	
City & State		City &	state			4. FEI Numb	59-08372	00	 	pplied For
Zìp	Country	Zιρ		Count	try	5. Certificate	of Status Desired		\$8.75 Ad	ditional
6. Name and Address of Current Registered			Agent			7. Name and	d Address of Nev	Registered	Agent	
PSALTIS, JOHN 411 19TH ST S					Name	- -				
					Street Address (I	ress (P.O. Box Number is Not Acceptable)				
SI	PETERSBURG FL 33712		,	Ì						
			:	ļ	City			FL	Zìp Cad	 e
8. The above	e named entity submits this statement for	or the purpose	of changing its re	gistere	ed office or register	ed agent, or bo	oth, in the State of		tamillar with.	and acce _t
SIGNATURE	<u> </u>					• • • • • • • • • • • • • • • • • • •				
	Signature Typed or printed name of registered agent	and tile if applica	NOIE R	egistered	d Agent signature required	when revisialing)		DATE		
After	ILE NOW!!! FEE IS \$150.00 May 1, 2006 Fee Will Be \$550.00 k Payable to Florida Department of		•				9. Election Carr Trust Fund C			.00 May E. ed to Fees
10.	OFFICERS AND	<u> 5</u> 49 g y 16 3		11.		ADDITIONS	/CHANGES TO O	CEICERS AND	niescróe	c ini 11
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NAME	PSALTIS, JOHN			NAME	:					
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TSTLE	ST PETERSBURG FL			-	ST- 21P			ניט ו בניטי		<u></u>
NAME	PSALTIS, HELEN		Delete	TITLE	}				Change	☐ Addition
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CITY-ST-ZIP	ST PETERSBURG FL			CITY-	ST-ZIP					
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NAME STREET ADDRESS	PSALTIS, BILL 411 19TH ST SOUTH		:	NAME STREE	ET ADDRESS					
CHY-ST-ZIP	ST PETERSBURG FL			E .	SI-ZIP					
TOTLE	D		☐ Delete	TITLE					☐ Change	☐ Additio
NAME	PSALTIS-CONNOLLY, MIA G			NAME						
STREET ADDRESS CITY-ST-ZIP	411-19TH STREET, SOUTH ST. PETERSBURG FL		1		IT ADORESS ST-ZIP					
TITLE			☐ Delete	TITLE					FT Change	[**] A.522*
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NAME STREET ADDRESS				NAME STREE	T ADDRESS					
CITY-ST-ZIP					57-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 attachment with an address, with all other like empowered.

SIGNATURE: John PSALTIS — basing furtilists.

FILED