## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with

SIGNATURE:

## FILED Aüg 29, 2005 08:00 AM Secretary of State **DOCUMENT # 433304** 1. Entity Name FAY POTTER UNDERFASHIONS, INC. Mailing Address Principal Place of Business 95-31 HARDING AVE. 95-31 HARDING AVE. SURFSIDE, FL 33154-2501 SURFSIDE, FL 33154-2501 US CR2E034 (10/03) 06292005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1487192 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GEWIRTZ, ARNOLD DO NOT WRITE 95-31 HARDING AVE. SURFSIDE, FL 33154-2501 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Apent stangure required when reinstation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 7, 2005 10. OFFICERS AND DIRECTORS CPTS TITLE GEWIRTZ, ARNOLD NAME STREET ADDRESS 95-31 HARDING AVE. SURFSIDE, FL 331542501 CITY-ST-ZIP TITLE U00000377327 08/29/05-80004-021 158.75 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with his 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 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 of trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if