FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # 628141

BEACH BUNNY FASHIONS, INC.

Principal Place of Business Mailing Address						P (MBYIN BYIND A) BUT I IDYEL (VAL) BIRDA (VAI A) BUT	, U)Uł					
1201 S. OCEAN		1201 S. O	1201 S. OCEAN BLVD.									
POMPANO BEACH FL 33062			POMPANO BEACH FL 33062				. DO NOT WRITE IN THIS SPACE					
								15 5	PACE			
							3. Date Incorporated or Qualifed				ļ	
			De Marilian Address				07/02/1979 4. FEI Number Applied For					
— ·	lace of Business		2a. Mailing Address				59-1971157	Not Applicable				
21 Cuita Ant	#	26 Suite	Suite, Apt. #, etc.						\$8.		ditional	
Suite, Apt.	#, etc.		27				5. Certifcate of Status Desired		•	e Req		
City & State			City & State				6. Election Campaign Financing		\$5	00 4	lav Be	
-	•	— ´	28				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees					
23 Zip	Country		Zip Country				This corporation owes the current year Intangible					
24	`		30	•		Personal Property Tax.						
241	9. Name and Address of Curre		Agent		_		10. Name and Address of New Registere	d A	gent			
~.					81	Name						
OZEI	LIE, RICHARD G., ESQ.				02	Stroot Ade	dress (P.O. Box Number is Not Acceptable)					
700 S.E. THIRD AVE.				82 Street Add			uress (P.O. Box Number is Not Acceptable)					
SUIT	E 200				83							
FT. L	AUDERDALE FL								Jac I	Zip Co	200	
					84 City		F	L	85	Zip Ci	Jue	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida Sucl	h change was al	uthonzed	l bv 1	the comorat	rporation submits this statement for the purpose tion's board of directors. I hereby accept the app	of ch oint	nangin ment a	ng its r as reg	egistered istered	
SIGNATURE							red when reinstating) DATE					
40	Signature, typed or printed name of registered a	gent and title if applicable AND DIRECTORS		Registered	Agent	t signature requir	ADDITIONS/CHANGES TO OFFICERS	ANC	DIRE	CTOF	RS IN 12	
12.	p .	IND DIRECTORS	DELETÉ	1.1 TI	n F	"	ABBITIONO OF PARCES TO C. LICENCE		Cha		Addition	
TITLE	TAYLOR, JEAN			1.2 NA							,	
NAME	ACCA O COEAN PILO				1.3 STREET ADDRESS							
STREET ADDRESS	POMPANO BEACH FL		1.4 CI			1						
CITY-ST-ZIP	ST ST		☐ DELETE	2.1 TIT					☐ Cha	ange	Addition	
TITLE				2.2 NA						-		
NAME	TATEOTI, SOTTO					ADDRESS				g·		
STREET ADDRESS				2.4 CITY-ST-ZIP						\		
CITY-ST-ZIP	DELETE 3.1T			1-21			Cha	ange	Addition			
TITLE	,		3.2 NA					_	-			
NAME				- 6		ANNDESS					ľ	
STREET ADDRESS				3.3 STREET ADDRESS 3.4. CITY-ST-ZIP						1		
CITY-ST-ZIP			☐ DELETE			1-21			Cha	ange	Addition	
TITLE				4. 2 NAME					_	-		
NAME						ADDRESS						
STREET ADDRESS	,			4.3 STREE			•					
CITY-ST-ZIP			☐ DELETE	4.4 CITY-5 5.1 TITLE		1-4.15			Cha	ange	Addition	
TITLE				5.1 IIILE 5.2 NAME						-	_	
NAME				1		ADDRESS						
STREET ADDRESS	The second secon			5.4 CT								
CITY-ST-ZIP	316, 2027 A	Delete 64		6.1 TT		+			Cha	angé	Addition	
TITLE	- 717			6.2 NA		1			_	-	_	
NAME :	1				-	1						

CITY-ST-ZIP 14. I hereby certify that the information supplied with this 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90049 029 ***150.00