## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # **F39148** 

(4)

CHRISTOPHER'S OF PALM BEACH, INC. Maling Address Principal Place of Business 308 SOUTH COUNTY ROAD 308 SOUTH COUNTY ROAD PALM BEACH FL 33480 PALM BEACH FL 33480 3a. Date of Last Report 3. Date Incorporated or Qualified 02/09/1995 06/02/1981 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-2095933 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State  $\Gamma$ Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zipi Country Ζiρ Yes No Fiorida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) DIAMOND, JOSEPH 82 308 SOUTH COUNTY ROAD 83 PALM BEACH FL 33480 Zip Code 85 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOT): Registered Agent signature required when reinstating Signature, typod or printers name of registered agent and tite. If entricable CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. T1 Change Addition DELETE 1.1 TITLE TOTAL 1.2 NAME DIAMOND, LENORE NAME 2784 SOUTH OCEAN BLVD. 1.3 STREET ADDRESS STREET ADDRESS 1.4 CHY-ST-ZIP PALM BEACH FL CITY-SI-7P ☐ Change Addition []] DELETE 2. 1 THUE ٧S THE 2.2 NAME DIAMOND, JOSEPH NAME 2.3 STREET ADDRESS 2784 S OCEAN BLVD. STREET ADDRESS 2.4 CITY - \$1 - 70° PALM BEACH FL CITY - ST - ZIP Change Addition DELETE 3. 1 TITLE TITLE DIAMOND, JOSEPH 32 NAME NAME 2784 S OCEAN BLVD. 3.3. STREET ADDRESS STREET ADDRESS PALM BCH. FL 3.4 CHY+ST-ZIP CITY-ST-ZIP Change Addition ["] DELETE 4. 1 TIBLE THILE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition TIT DELETE 5. 1 TILE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP Addition Change DELETE 6. 1 TITLE THTLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 logal effect as if made under certify 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/01 30 90 407 655 0544