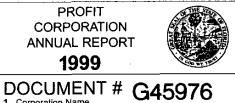
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 10, 1999 8:00 am Secretary of State

05-10-1999 90016 028 ***158.75

| LOVELL | BOUTIQUE, INC. | | | | | | | | |
|--|--------------------------------|------------------|----------|--|----------------------|---|--|-----------------|------------|
| Principal Place | of Business | Mailing Address | | | | - ! | FIII BIBAL DI | BIL BIBLI BEBLI | |
| 9839 S.W. 40TH STREET C/O ANA LOURDES PAREDES MIAMI FL 33165-3911 9839 S.W. 40TH ST. US MIAMI FL 33165 | | | | | | DO NOT WRITE | IN THIS | SPACE | |
| | | | | | | 3. Date Incorporated or Qualifed | | | |
| | | | | | | 06/27/1983 | | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | | | | | pplied For |
| 26 | | | | | | 59-2336706 | | lot Applicable | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 27 | | | | | | | s Desired \$8.75 Additional Fee Required | | |
| City & State City & State | | | | - | | -6. Election Campaign Financing \$5.00 May Be | | | |
| 28 | | | | | | Trust Fund Contribution Added to Fees | | | |
| Zip | Country | Zip | Cour | ntry | | 8. This corporation owes the current | year Inta | angible | _ |
| 24 | 25 29 | | | | | Personal Property Tax. Yes No | | | |
| | 9. Name and Address of Current | Registered Agent | | 1 | | 10. Name and Address of New Reg | istered / | Agent | |
| | | | | 81 | Name | | | | |
| PAREDES, ANA LOURDES | | | Ì | 82 Street Address (P.O. Box Number is Not Acce | | | e) | | |
| 9839 BIRD ROAD MIAMI FL 33165 | | | Ļ | _ | | | _ | | |
| MIAN | WI FL 33163 | | | 83 | | | | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes | | | | 84 | City | | FL | | Code |
| | | | | | l signature required | when reinstating) | DATE | 1, 1999 | <u></u> |
| 12. | OFFICERS AND | | 13. | | | ADDITIONS/CHANGES TO OFFIC | ERS AN | | |
| TITLE | VD DELETE | | | 1.1 TITLE | | | | Change | Addsdoil |
| NAME | PAREDES, JOSE | | | 1.2 NAME | | | | | |
| STREET ADDRESS | AMAGUET | | | | ADDRESS | | | | ĺ |
| CITY-ST-ZIP | MIAMI FL | | | Y-ST | -ZIP | | | Change | Addition |
| TITLE | | | | 2.1 TITLE 2.2 NAME | | | | Grange | |
| NAME | PAREDES, MIRTA | | | | 4000000 | | | | |
| STREET ADDRESS | 141A141 F1 | | | 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP | | | | | |
| CITY-ST-ZIP | MIAMI FL PD □ DELETE | | | 3.1 TITLE | | | | Change | Addition |
| TITLE NAME | | | 3.2 NA | | | · · | | | |
| STREET ADDRESS | 9839 BIRD ROAD | | | | ADDRESS | | | | } |
| CITY-ST-ZIP | MIAMI FL | | 3.4. CI | | | | | | İ |
| TITLE | tony and 1 C | ☐ DÉLETE | 4,1 TIT | | | | | Change | Addition |
| NAME | | | 4, 2 NA | | | | | | |
| STREET ADDRESS | | | 4.3 STF | REET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CIT | | | | | | |
| TITLE | | ☐ DELETE | 5.1 TIT | | | | | Change | Addition |
| NAME | | | 5.2 NA | ME | | | | | ļ |
| STREET ADDRESS | | | 5.3 \$71 | REET | ADDRESS | | | | } |
| CITY-ST-ZIP | | | 5.4 CIT | Y-ST | r-ZIP | | | | |
| TITLE | | ☐ DELETE | 6.1 TIT | LE. | | | | ☐ Change | ☐ Addition |
| NAME | | | 6 2 NA | ME | | | | | |

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 chapters, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

=:::: = :=: