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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G63382

(7)

MIMI'S PETITE BOUTIQUE, INC.

Mailing Address

Secretary of State

FILED

Mar 26 1997 8:00am



4407 S. Tamiami TRL. Sarasota Fl 34231		4407 S. TAMIAMI TRL. SARASOTA FL 34231-3	453	·	
				3. Date Incorporated or Qualified 09/27/1983	3a. Date of Last Report 04/25/1996
2. Principal Pl	ace of Business	2s. Mailing Address		4. FEI Number	Applied For
21		26		59-2333218	Not Applicable
Suite, Apt	#, etc	Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032,
24	25	29	30		Yes No
	9. Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	enthal, Mildred		81 Name		
4730	COUNTRY MANOR DRIVE		82 Street A	ddress (P.O. Box Number is Not Acceptab	le)
SARA	ASOTA FL 34233				
			83		i
			84 City		85 Zip Code
					FL 85 Zip Code
11. Pursuant i office or re agent if a	to the provisions of Sections 607.0 egistered agent, or both, in the St m familiar with, and accept the ob-	0502 and 607.1508, Florida S ate of Florida Such change v oligations of, Section 607.050	tatutes, the above-named ovas authorized by the corpo is, Florida Statutes.	orporation submits this statement for the poration's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
SIGNATURE					
	Signature typed or printed name of registured	Lagent and little if applicable AND DIRECTORS	(NOTE: Registered Agent signature in	equired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE
12.		AND DIRECTORS DELETE		ADDITIONS/CHANGES TO OFFIC	Change Addition
THILE	POCCUTUAL MILITORIA				
NAME	ROSENTHAL, MILDRED 4730 COUNTRY MANOR DR	M/ <i>I</i> E	1.2 NAME		
STREET ADDRESS		NAC	1.3 STREET ADDRESS		•
CITY - S1 - ZIP	SARASOTA FL	DELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE		L precia			
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
City - ST - 7IP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
TITLE		C officia	3.2 NAME		
NAME					
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - S1 - 21F		DELETE	3.4. CITY - ST - ZIP		Change Addition
Tiffe		C) offere	4. 2 NAME		
NAME					
STREET ADDRESS			4 3 STREET ADDRESS		
City-St-ZiP		DELETE	4.4 CITY-ST-ZIP 51 TITLE		Change Addition
TITLE					onlings readition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIF		DELETI	5 4 CITY-ST-ZIP		Change Addition
TULE					Li change Li Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - 7IP		P. T. of D. Philadelphia	6.4 CITY-ST-ZIP	ated in Section 110 07/3V/i). Elected Statute	a Lifuther certify that the

14. I do 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, at on an attachment with an addiess.)

SIGNATURE: