

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 AUG 22 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G95902 1. Corporation Name LITTLE PRINCESS INVESTMENT CORP.	(4)
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Principal Place of Business 14578 RIVER BEACH DRIVE #310 PORT CHARLOTTE FL 33953 US	Mailing Address P.O. BOX 27117 EL SOBEAN FL 33927
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 El Sobean Rd Suite, Apt. #, etc. B City & State Port Charlotte Zip 33953 Country US	2a. Mailing Address 26 P.O. Box Suite, Apt. #, etc. 27 27115 City & State El Sobean Fl., Zip 33927 Country US	3. Date Incorporated or Qualified 04/12/1984 3a. Date of Last Report 01/02/1997 4. FEI Number 59-2748872 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent JIROUT, STANISLAV J. 14578 RIVER BEACH DR. #310 PORT CHARLOTTE FL 33953	10. Name and Address of New Registered Agent 81 Name Jirout Stanislav J. 82 Street Address (P.O. Box Number is Not acceptable) 4352 El Sobean Rd 83 # B 84 City Port Charlotte FL 85 Zip Code 33953
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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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD V NAME JIROUTOVA, MARIE STREET ADDRESS TISORA 20 CESKE HERMANICE 58552 CITY-ST-ZIP CZECH REPUBLIC	1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME JIROUTOVA 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE MD L NAME JIROUT, STANISLAV STREET ADDRESS 14578 RIVER BEACH DRIVE, #310 CITY-ST-ZIP PORT CHARLOTTE FL 33953	2.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME STANISLAV 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE SD NAME STRBIK, PAVEL STREET ADDRESS CASLAVSKA 199 CITY-ST-ZIP KUTHA HORA 28401, CZECH REP.	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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, or on an Attachment with an address.

SIGNATURE _____ 8/19/97 941-355-8252

CR2E034 (4/97)

(2)

August 19, 1997

Division Of Corporations
PO Box 6327
Tallahassee, Fl. 32314

Dear Sirs,

Attached, please find a check in the amount of \$165, which is payment for the year 1997. I am sorry for the delay in sending this check, but I did not receive the original packet. I just received the second notice your office sent out. You will note that the address has changed and probably is the reason I did not receive the initial notice. I have made the proper address correction on the form enclosed with my check.

I must also advise you that I was under the impression that I had already paid my annual fee, (see enclosed copy of document from your office, dated January of 1997).

I thank you in advance for your cooperation in this matter.

Sincerely,



Stanislav J. Jirout

CC: file