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FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H60660 (8)
1. Corporation Name
FASHION BUG OF PANAMA CITY, INC.

481



Principal Place of Business
517 W. 23RD ST.
450 WINKS LN. TAX DEPT.
PANAMA CITY FL 32405
US

Mailing Address
450 WINKS LN
CORPORATE TAX
BENSALEM FL 18020
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

06/06/1985

4. FEI Number

52-1510811

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and filer of application

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME DORRITT, BERN
STREET ADDRESS 450 WINKS LN
CITY-ST-ZIP BENSALEM PA 19020

TITLE S ☒ DELETE

NAME BRODSKY, BERNARD
STREET ADDRESS 450 WINKS LN
CITY-ST-ZIP BENSALEM PA

TITLE VT ☒ DELETE

NAME BRODSKY, BERNARD
STREET ADDRESS 450 WINKS LN.
CITY-ST-ZIP BENSALEM FL

TITLE VD ☐ DELETE

NAME SPECTER, ERIC
STREET ADDRESS 450 WINKS LANE
CITY-ST-ZIP BENSALEM PA

TITLE D ☐ DELETE

NAME BERN, DORRIT J
STREET ADDRESS 450 WINKS LANE
CITY-ST-ZIP BENSALEM PA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VT IS
JON A. GOLDBERG
← SAME

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

SIGNATURE



JON A. GOLDBERG

APR 16 1998

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