


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # H70443 1. Entity Name FANCY FINGERS BOUTIQUE, INC.			
Principal Place of Business 8926 TAFT ST PEMBROKE PINES, FL 33024		Mailing Address 8926 TAFT ST PEMBROKE PINES, FL 33024	
DO NOT WRITE IN THIS SPACE			
		01252006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2563958	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RASTAGH, FARZANEH 8541 PASADENA BLVD PEMBROKE PINES, FL 33024		DO NOT WRITE IN THIS SPACE	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE UD00000408807 02/08/06-80073-017 150.00	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P RASTAGH, FARZANEH 8541 PASADENA BLVD. PEMBROKE PINES, FL		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered			
SIGNATURE: <u><i>Farzaneh Rastagh</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>1-25-06</u> Daytime Phone # _____	