

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 10, 2007 8:00 am**  
**Secretary of State**

05-10-2007 90029 017 \*\*\*150.00

DOCUMENT # J49416

1. Entity Name

AUNT HATTIE'S ATTIC, INC.



Principal Place of Business

10828 NE SIXTH AVE.  
N. MIAMI FL 33161-7132

Mailing Address

10828 NE SIXTH AVE.  
N. MIAMI FL 33161-7132

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2831855

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

RAND, TOBY  
1740 JEFFERSON AVE.  
#10  
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

JOHN CLEMENT COETZEE

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

859 N.E. 115 ST

City

MIAMI

FL

Zip Code

33161

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

JOHN CLEMENT COETZEE

4-19-07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME GOLDMAN, KENNETH ☒ Delete  
STREET ADDRESS 401 NE 109TH ST.  
CITY- ST- ZIP MIAMI SHORES FL

TITLE VD  
NAME REARDON, CORA ☒ Delete  
STREET ADDRESS 401 NE 109TH ST.  
CITY- ST- ZIP MIAMI SHORES FL

TITLE STD  
NAME BUCKNOFF, DELCIE ☒ Delete  
STREET ADDRESS 13105 IXORA CT  
CITY- ST- ZIP NORTH MIAMI FL 33181

TITLE P  
NAME JOHN CLEMENT COETZEE ☒ Delete  
STREET ADDRESS 859 N.E. 115 ST  
CITY- ST- ZIP MIAMI FL 33161

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P. ☒ Change ☐ Addition  
NAME JOHN CLEMENT COETZEE  
STREET ADDRESS 859 N.E. 115 ST  
CITY- ST- ZIP MIAMI FL. 33161

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY- ST- ZIP

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CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Kenneth Goldman KENNETH GOLDMAN

4-19-07 786-223-1869

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #