## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 10 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State Secretary of State ANNUAL REPORT 1998 DIVISION OF CORPORATIONS **DOCUMENT #** (2)NU-2-U BOUTIQUE CO., INC. Principal Place of Business Mailing Address 1764 NW US 1 1764 NW US 1 STUART FL 34994 STUART FL 34994 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 05/25/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 1764 NW U.SI 26 65-0059312 Not Applicable Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible □ Ño Personal Property Tax due June 30. 29 30 and Address of Current Registered Agent 10. Name and Address of New Registered Agent LORI STEELE/ DONALD ZUCKERMAN 9352 NW 53 ST SUNRISE FL 33351 83 11. Pursuant to the profisions 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 facility with, and accept the objections of, Section 607.0505, Florida Statutes. SIGNATION (NOTE Ringistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DEFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE STEELE, LORI 1.2 NAME 714 NW 53 ST STREET ADDRESS 1.3 STREET ADDRESS SUNRISE FL 33351 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE ZUCKERMAN, DONALD NAME 2.2 NAME 714 PSL BLVD STREET ADDRESS 2.3 STREET ADDRESS PSL FL 34953 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 34. DITY-ST-ZIP ■ Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 5.1 THLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE

14. Thereby 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 supplied that 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 of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changar, of on an attachment with an address?

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

2/4/9860