FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

	1996		1115	DIVISION	OF CORPO	RATIC	ONS					
1. Corporatio			53	(7)								
CAH	BOUTIQUE	, INC.						 		10 1111 1111 11	Bii bibii bia	
Principal Place	e of Business		Mai	iling Address								
430 S DIXIE MIAMI FL 3				430 S DIXIE HWY MIAMI FL 33146								
								3. Date Incorporated or 0 09/13/1988	Qualified		of Last F 3/21/19	
	ace of Business		2a.	Mailing Address				4. FEI Number		1		Applied For
21		···	26					65-0072639				Not Applicable
Suite, Apt.			27	Suite, Apt. #, etc.				5. Certificate of Status De	esired			Additional Required
City & State			28	City & State				6. Election Campaign Fin Trust Fund Contributio	_			0 May Be d to Fees
Zıp 24]	25	Country }	29	Zip	i	ountry		8. This corporation has lis	ability for i	ntangible ta	x under s	199.032,
31		d Address of Curre		ered Agent	30	T -		Florida Statutes 10. Name and Address	Yes		Anort	
				- <u></u>	·-···	81	Name	10. There and Addition	P. HOW IT	-Aistalag 1	April	
	BEHDAD					82	Street Add	ress (P.O. Box Number is Not	Accentable	e)		
	DIXIE HWY.						JIIOOI Addi	FOSS (FISH DON PROPERTY INDICATE INDICA				
MIAMI I	EL 33146					83						
mwani i												
mwani i						84	City				85 Zi	n Code
11. Pursuant t	to the provisions	of Sections 607 050	02 and 607	1508 Florida Statu	tor the ab		·			FL		p Code
11. Pursuant t	ou again, or bo	ii, iii tiio Otato Oi i io	mua. Duch i	unange was aumon	zeo ov me		·	oration submits this statement for ard of directors. I hereby accept	or the purp	FL cose of cha		
11. Pursuant t or register familiar wit	ou again, or bo	of Sections 607.050 h, in the State of Flo ne obligations of, Sec	mua. Duch i	unange was aumon	zeo ov me		·	oration submits this statement fo ard of directors. I hereby accept	or the purp t the appo	FL cose of cha intment as		
11. Pursuant t or register familiar wit SIGNATURF	th, and accept the	ne obligations of, Sec	ction 607.05	505, Florida Statute	is.	ove-na corpo	arned corpor eration's boar	oration submits this statement for ard of directors. Thereby accept activities reinstating:	or the purp t the appo	FL cose of cha intment as		
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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 conforation of 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.

GNATURE:

SIGNATURE: SIGNATURE AND TYPEO OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

2-15-96
Date Date Doutine Proce #