

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81654

FILED  
Aug 19, 2005  
Secretary of State

Entity Name: SASSY KAT LINGERIE OF PALM BEACH, INC.

**Current Principal Place of Business:**

SASSY KAT LINGERIE, INC.  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

% ROBERT W. WYMAN  
1705 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

FEI Number: 30-0015052      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SASSY KAT LINGERIE, INC.  
1705 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415      US

**Name and Address of New Registered Agent:**

WYMAN, ROBERT W AGENT  
3095 S MILITARY TRAIL  
5  
LAKE WORTH, FL 33463 US

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.

SIGNATURE: ROBERT W WYMAN

08/19/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SIIRA, ROY  
Address: 4210 WATEWAY DR  
City-St-Zip: LAKE WORTH, FL 33461

Title: PDT ( ) Delete  
Name: SITRA, BRUCE W  
Address: 530 NORTH C ST  
City-St-Zip: LAKE WORTH, FL 33461

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROY SIIRA

PRES

08/19/2005

Electronic Signature of Signing Officer or Director

Date