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PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L88923

FASHION PEARLS, INC.

(2)

FILED Mar 04 1998 8:00am Secretary of State



Suite, Apt. 4, etc. Suite, Apt. 4, etc. Suite, Apt. 4, etc. Suite, Apt. 4, etc. Status Desired S.75 Additional Fee Required Fe	Principal Place of Business		Mailing Address				. reatiete ant raide editte totte titten biet diete Gibt! Biffit alfatt filet.		
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2. Principal Place of Business 2e Mailing Address 4. FEI Invited Applied For Not Applied For Sulfe, Apt. #, etc. Sulfe, Apt.	PEMBROKE	PINES FL 33026	PEMBROKE PINES FL 33026						
3. Principal Place of Business									
Application									
Suite, Apt. #, etc. City & State Country 8. This corporation coves or has paid the current year Interrupble Personal Property Tax due Juns 30; State KOPROWSKI, PAUL A CPA 10031 PINES BLVD, #224 PEMBROKE PINES FL 33024 10131 PINES BLVD, #244 PEMBROKE PINES FL 33024 10131 PINES BL	2. Principal Place of Business 2. Mailing Address								
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Zip Country 27p Country 28 S. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Suges No				h					
28		Country		Co	Country				
NAME ADDITIONS/CHANGES TO OPERED ABOND, BLDG 117., #202 TITLE NAME STREET ADDRESS CITY-ST-2P STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-2P STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-2P STREET ADDRESS STREET ADD	····	⊢ ′	— ·	— —	<u> </u>				
Signature PD		I=al		[30]	1301				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the abovernamed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the abovernamed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, administrated by the corporation's board of directors. I hereby accept the oppointment as registered agent, or both, in the State of Florida Statutes, the abovernamed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the abovernamed corporation's board of directors. I hereby accept the oppointment as registered agent, or both, in the State of Florida Statutes, the abovernamed corporation's board of directors. I hereby accept the oppointment as registered agent age					81	Name			
PEMBROKE PINES FL 33024 2							<u> </u>		
B3					82 Street Address (P.O. Box Number Is Not Acceptable)				
11. Pursuant to the provisions 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 office or registered agent, or both, in the State of Florida Statutes. SIGNATURE SIGN	rı	EMBNONE FINES FL 33024			-				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Stutch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature Property Proper					63			i	
### PD					84	City	85 Zi	n Code	
SIGNATURE Signature, typed or printed name of registered apport and title if appricable (NOTE Registered Agent signature required when reinstating) DATE								•	
SIGNATURE Signature, typed or printed name of registered apport and title if appricable (NOTE Registered Agent signature required when reinstating) DATE	11. Pursuant	to the provisions of Sections 607. registered agent, or both, in the Si	0502 and 607.1508, Florid	la Statutes, the a	bove)-named cor	rporation submits this statement for the purpose of changing	its registered	
Signature. Spread or printed name of registered apport and blind if applicable (NOTE Registered Apent eignature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	agent. I a	am familiar with, and accept the of	bligations of, Section 607.0	0505, Florida Sta	tutes	што согрога ;,	ation's board of directors, thereby accept the appointment t	as registered	
12. OFFICERS AND DIRECTORS TITLE MAME STREET ADDRESS CITY-ST-ZIP DELETE AL CITY-ST-ZIP AL CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP DELETE AL CITY-ST-ZIP AL CITY-ST-ZIP AL CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAGDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Location Addition Addit	SIGNATURE								
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indicated on this annual report or supplied will this limit does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 or the receiver of 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 the appears in the corporation of the corporation of the corporation of the receiver of 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 the appears in the corporation of the corporation of the receiver of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicates are considered as the corporation of the corporat