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

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L98957 (8)

1. Corporation Name
CHARISMA COLLECTION, INC.

Principal Place of Business
~~320 S.W. 1ST AVE.~~ 222 SW 1 Ave.
FT. LAUDERDALE FL 33301

Mailing Address
~~320 SW 1ST AVE~~ 222 SW 1 Ave.
FT. LAUDERDALE FL 33301
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/11/1990
3a. Date of Last Report: 04/14/1994

21 Principal Place of Business: 222 SW 1 Avenue
22 Suite, Apt. #, etc:
23 City & State: Ft. Lauderdale, FL
24 Zip: 33301
25 Country: US

26 Mailing Address: 222 SW 1 Avenue
27 Suite, Apt. #, etc:
28 City & State: Ft Lauderdale, FL
29 Zip: 33301
30 Country: US

4. FEI Number: 65-0221066 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ROY, MARIE M.
~~5810 STIRLING ROAD~~ 3310 W. Hillsborough Blvd.
~~HOLLYWOOD, FL 33021~~ Deerfield Beach, FL 33442

10. Name and Address of New Registered Agent

81 Name: Marie M. McClaine (name change only)
82 Street Address (P.O. Box Number is Not Acceptable): 3310 W. Hillsborough Blvd.
83
84 City: Deerfield Beach FL 85 Zip Code: 33442

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, type or print name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | D | 11 TITLE | ☐ Change ☐ Addition |
| NAME | CARROLL-DAVIS, ELAINE | 12 NAME | 000001520390 |
| STREET ADDRESS | ~~220 S.W. 1ST AVE.~~ 222 S.W. 1st AVE. | 13 STREET ADDRESS | -06/22/95--01037--012 |
| CITY ST ZIP | FT. LAUDERDALE FL | 14 CITY ST ZIP | ****200.00 ****200.00 |
| TITLE | | 21 TITLE | ☐ Change ☐ Addition |
| NAME | | 22 NAME | |
| STREET ADDRESS | | 23 STREET ADDRESS | |
| CITY ST ZIP | | 24 CITY ST ZIP | |
| TITLE | | 31 TITLE | ☐ Change ☐ Addition |
| NAME | | 32 NAME | |
| STREET ADDRESS | | 33 STREET ADDRESS | |
| CITY ST ZIP | | 34 CITY ST ZIP | |
| TITLE | | 41 TITLE | ☐ Change ☐ Addition |
| NAME | | 42 NAME | |
| STREET ADDRESS | | 43 STREET ADDRESS | |
| CITY ST ZIP | | 44 CITY ST ZIP | |
| TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY ST ZIP | | 54 CITY ST ZIP | |
| TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| NAME | | 62 NAME | REMITTED BY MAY 1 |
| STREET ADDRESS | TIS 6/20/95 | 63 STREET ADDRESS | |
| CITY ST ZIP | | 64 CITY ST ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Elaine Russell-Davis 1/19/95 305-763-5635
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0200462 CP