

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M82602

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: THE BREAST FEEDING BOUTIQUE, INC.

**Current Principal Place of Business:**

1575 SW 4TH CIRCLE  
BOCA RATON, FL 33486

**New Principal Place of Business:**

433 PLAZA REAL  
SUITE 275  
BOCA RATON, FL 33432

**Current Mailing Address:**

1575 SW 4TH CIRCLE  
BOCA RATON, FL 33486

**New Mailing Address:**

FEI Number: 65-0462881      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JONES, JENNIFER L  
1575 SW 4 CIRCLE  
BOCA RATON, FL 33486      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: JONES, RICHARD SCOTT  
Address: 4505 NW 6TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33442

Title: PD ( ) Delete  
Name: JONES, JENNIFER  
Address: 4505 NW 6TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33442

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

Title: V (X) Change ( ) Addition  
Name: JONES, JR., RICHARD SCOTT  
Address: 1575 S W 4 CIRCLE  
City-St-Zip: BOCA RATON, FL 33486

Title: PD (X) Change ( ) Addition  
Name: JONES, JENNIFER  
Address: 1575 S W 4 CIRCLE  
City-St-Zip: BOCA RATON, FL 33486

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: JENNIFER JONES

P/D

01/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date