


FILE NOW: FILING FEE IS \$61.25

FILED
Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # N97000002207 (5)
1. Corporation Name
NEAT STUFF, INC.



Principal Place of Business 9300 NW 27 AVE. JUVENILE JUSTICE CENTER #T-100 MIAMI FL 33142	Mailing Address P.O. BOX 420557 MIAMI FL 33242
---	--

3. Date Incorporated or Qualified 04/17/1997	
4. FEI Number 65-0746714	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26 15190 S.W. 80th Ave.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Miami, FL
Zip 24	Country 30 USA
Country 25	Zip 29 33158

9. Name and Address of Current Registered Agent
**SCHIMMEL, JOSEPH B ESQ.
8400 SOUTH DADELAND BLVD.
SUITE 600
MIAMI FL 33156**

10. Name and Address of New Registered Agent

81 Name P. TRISTAN BOURGOIGNIE, ESQ.	
82 Street Address (P.O. Box Number is Not Acceptable) 701 Brickell Avenue	
83 Suite 1900	
84 City Miami	85 Zip Code FL 33131

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE **P. TRISTAN BOURGOIGNIE, ESQ.** **4/15/98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE D	<input type="checkbox"/> DELETE
NAME KRUG, PHYLLIS	
STREET ADDRESS 3300 NW 27 AVE., T-100	
CITY-ST-ZIP MIAMI FL 33142	
TITLE D	<input type="checkbox"/> DELETE
NAME CZERWINSKI, LINDSAY	
STREET ADDRESS 3300 NW 27 AVE., T-100	
CITY-ST-ZIP MIAMI FL 33142	
TITLE D	<input type="checkbox"/> DELETE
NAME BOURGOIGNIES, CHANTAL	
STREET ADDRESS 3300 NW 27 AVE., T-100	
CITY-ST-ZIP MIAMI FL 33142	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME
1.3 STREET ADDRESS 15190 S.W. 80th Avenue
1.4 CITY-ST-ZIP Miami, FL 33158
2.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS 12460 S.W. 69th Court
2.4 CITY-ST-ZIP Miami, FL 33156
3.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME
3.3 STREET ADDRESS Bourgoignie, Chantal
3.4 CITY-ST-ZIP 5875 S.W. 97th Street
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Phyllis Krug* *Phyllis Krug* **4/20/98** **3052531533**

CR2E037 (10/97)