2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 31, 2008 8:00 am **Secretary of State DOCUMENT # P00000053189** 03-14-2008 90042 041 ***150.00 MRS. BLUMIE'S PORCELAIN DOLL STUDIO, INC. Principal Place of Business 207 N RODBYCCOCR 414 LAKEFFANOS POPD 01110000 LAKEFLACID, FL. 33852 SEERING FL 33870 03022008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1019001 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent **BLUMENTAL, CATHERINE M** DO NOT WRITE 414 LAKE FRANCIS RD LAKE PLACID, FL 33852 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floride. I am lamiliar with, and accept the obligations of registered agent. 9. Élection Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS MLE **BLUMENTHAL, CATHERINE** MALE STREET ADDRESS 414 LAKE FRANCIS ROAD . LAKE PLACID, FL 33852 CITY-ST-ZP TITLE NAME STREET ADDRESS CTY-51-21P TITLE NAME, STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ATTERESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MLE MALIF STREET ADORESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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