

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000043342

FILED  
Mar 22, 2004  
Secretary of State

Entity Name: SASSY ACCESSORIES, INC.

## Current Principal Place of Business:

920 E COCO PLUM WAY  
PLANTATION, FL 33324 US

## New Principal Place of Business:

## Current Mailing Address:

920 E COCO PLUM WAY  
PLANTATION, FL 33324 US

## New Mailing Address:

FEI Number: 65-1103316

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLEIN, STEVEN C  
7522 WILES ROAD SUITE 210  
CORAL SPRINGS, FL 33067 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: D ( ) Delete  
Name: REMLINGER, JAMES  
Address: 5065 RAVENWOOD DRIVE  
City-St-Zip: MARIETTA, GA 30066

Title: D ( ) Delete  
Name: STRICKMAN, HOWARD  
Address: 920 E COCO PLUM WAY  
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete  
Name: STRICKMAN, SYDELLE  
Address: 920 E COCO PLUM WAY  
City-St-Zip: PLANTATION, FL 33324

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HOWARD STRICKMAN

D

03/22/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date