2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000044900

Entity Name: APRIL'S CLOSET, INC.

FILED Apr 29, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New P	rincipal Place of Business:
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17891 S. DIXIE HGWY 17891 S. DIXIE HGWY SUITE G SUITE E

MIAMI, FL 33157 MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

17891 S. DIXIE HGWY 1830 S.E. 18 TERR SUITE G FLORIDA CITY, FL 33035 MIAMI, FL 33157

FEI Number: 65-1104340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BONWIT, ALAN M BONWIT, ALAN M 1830 S.E. 18 TERR 17891 S. DIXIE HGWY FLORIDA CITY, FL 33035 US SUITE G MIAMI, FL 33157 US

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: ALAN BONWIT 04/29/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

BONWIT, ALAN BONWIT, ALAN Name: Name:

17891 S. DIXIE HGWY SUITE G 1830 S.E. 18 TERR Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: FLORIDA CITY, FL 33035

Title: Title: () Delete (X) Change () Addition BONWIT, CHRISTINA BONWIT, CHRISTINA Name: Name:

17891 S. DIXIE HGWY SUITE G 1830 S.E. 18 TERR. Address: Address: MIAMI, FL 33157 FLORIDA CITY, FL 33035 City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change (X) Addition

Name: BONWIT, APRIL L Name: 1830 S.E. 18 TERR. Address: Address: City-St-Zip: City-St-Zip: FLORIDA CITY, FL 33035

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.

Ρ SIGNATURE: ALAN BONWIT 04/29/2005