

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015008

FILED
Apr 13, 2005
Secretary of State

Entity Name: ONCE UPON A TIME CHILDREN'S BOUTIQUE, INC.

Current Principal Place of Business:

10965 NORTH MILITARY TRAIL
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

10965 NORTH MILITARY TRAIL
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 81-0595526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLZHAUSEN, ALLISON K
1421 PALM CIRCLE
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

HOLZHAUSEN, ALLISON K
10774 LOCUST STREET
PALM BEACH GARDENS, FL 33418 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:

04/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HOLZHAUSEN, ALLISON K
Address: 1421 PALM CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33406 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HOLZHAUSEN, ALLISON K
Address: 10774 LOCUST STREET
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: ALLISON K HOLZHAUSEN

PRES

04/13/2005

Electronic Signature of Signing Officer or Director

Date