## 2007 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Feb 23, 2007 08:00 AM **Secretary of State** DOCUMENT # P03000153405 RAPHAEL FASHIONS, INC. Principal Place of Business Mailing Address 5501 NOB HILL ROAD 5501 NOB HILL ROAD SUNRISE, FL 33351 SUNRISE, FL 33351 CR2E034 (11/05) 01312007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0543794 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOLSTEIN, GERALD K DO NOT WRITE 8320 W SUNRISE BLVD, STE 203 PLANTATION, FL 33322 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 Florida. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable H00000645859 03/02/07-80069-014 150.00 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE SHABTAL RAPHAEL NAME STREET ADDRESS 5501 NOB HILL RD CITY-ST-ZIP SUNRISE, FL 33351 TITLE SHABTAI, DALIA NAME STREET ADDRESS 5501 NOB HILL RD CITY-ST-ZIP SUNRISE, FL 33351 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

KAPHABL SHABTAI