

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000127221

Entity Name: A TO Z BOUTIQUE INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

4301 WEST VINE STREET
UNIT A-26
KISSIMMEE, FL 34746 US

New Principal Place of Business:

Current Mailing Address:

3187 OWASSA CT
KISSIMMEE, FL 34746 US

New Mailing Address:

3055 BLOOMSBURY DRIVE
KISSIMMEE, FL 34747 US

FEI Number: 20-3484662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAAZAOU, ZIED
3187 OWASSA CT
KISSIMMEE, FL 34746 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: STD () Delete
Name: BAAZAOU, ZIED
Address: 3187 OWASSA CT
City-St-Zip: KISSIMMEE, FL 34746 US

Title: PD () Delete
Name: MAAMAR, ANOUAR
Address: 548 AVENIDA SEXTA APT 208
City-St-Zip: CLERMONT, FL 34714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: BAAZAOU, ZIED
Address: 3055 BLOOMSBURY DRIVE
City-St-Zip: KISSIMMEE, FL 34747 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ANOUAR MAAMAR

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date