

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157137

FILED  
Jan 29, 2007  
Secretary of State

Entity Name: BOUTIQUE HOSPITALITY MANAGEMENT, INC.

## Current Principal Place of Business:

234 MERIDIAN AVENUE  
# 4  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

## Current Mailing Address:

C/O KEITH SPACE  
P.O. BOX 402867  
MIAMI BEACH, FL 33140

## New Mailing Address:

FEI Number: 56-2544291      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACQUELINE M. MOODY, P.A.  
8429 FOREST HILLS DRIVE  
#304  
CORAL SPRINGS, FL 33065 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: P ( ) Delete  
Name: SPACE, KEITH  
Address: 234 MERIDIAN AVENUE, #4  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP ( ) Delete  
Name: SPACE, LYDIA  
Address: 234 MERIDIAN AVENUE, #4  
City-St-Zip: MIAMI BEACH, FL 33139

Title: T ( ) Delete  
Name: SPACE, KEITH  
Address: 234 MERIDIAN AVENUE, #4  
City-St-Zip: MIAMI BEACH, FL 33139

Title: S ( ) Delete  
Name: SPACE, LYDIA  
Address: 234 MERIDIAN AVENUE, #4  
City-St-Zip: MIAMI BEACH, FL 33139

## 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:

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 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: KEITH SPACE

P

01/29/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date