

FILED
Apr 13, 2007 8:00 am
Secretary of State

03-26-2007 90046 014 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

3/

DOCUMENT # P06000047934			
1. Entity Name XOHO BOUTIQUE, INC.			
Principal Place of Business 49-08 SW 154 PL. MIAMI, FL 33185		Mailing Address 49-08 SW 154 PL. MIAMI, FL 33185	
2. Principal Place of Business - No P.O. Box # 14711 SW 42nd Street		3. Mailing Address 14711 SW 42nd Street	
Suite, Apt. #, etc. Suite #201		Suite, Apt. #, etc. Suite #201	
City & State Miami, Florida		City & State Miami, Florida	
Zip 33185	Country USA	Zip 33185	Country USA
6. Name and Address of Current Registered Agent MORENO, CLAUDIA 39-55 SW 137 AVE., STE. 1 MIAMI, FL 33175		7. Name and Address of New Registered Agent Name MORENO CLAUDIA Street Address (P.O. Box Number is Not Acceptable) 14711 SW 42nd Street Ste #201 City Miami FL Zip Code 33185	
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. SIGNATURE <i>Claudia Moreno</i> (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MORENO, CLAUDIA 49-08 SW 154 PL. MIAMI, FL 33185 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MORENO, CLAUDIA 14711 SW 42nd Street Ste 201 Miami, Florida 33185 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MORENO, ALEJANDRA 49-08 SW 154 PL. MIAMI, FL 33185 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PERDOMO, ALEJANDRA 14711 SW 42nd Street Ste 201 Miami, Florida 33185 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALFEREZ, MAURICIO 49-08 SW 154 PL. MIAMI, FL 33185 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALFEREZ, MAURICIO 14711 SW 42nd Street. Ste #201 Miami, Florida 33185 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: <i>Claudia Moreno</i> 3/12/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			