


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 12, 2007 8:00 am**  
**Secretary of State**

03-12-2007 90365 001 \*\*\*158.75

<b>DOCUMENT # P06000095816</b> 1. Entity Name <b>RUTH BRA TREASURES &amp; LINGERIE, INC.</b>			
Principal Place of Business <b>2000 PRESIDENTIAL WAY UNIT 1906 WEST PALM BEACH, FL 33401</b>		Mailing Address <b>2000 PRESIDENTIAL WAY UNIT 1906 WEST PALM BEACH, FL 33401</b>	
2. Principal Place of Business - No P.O. Box # <b>2119 South US Hwy 1</b>		3. Mailing Address <b>2119 South US Hwy 1</b>	
Suite, Apt. #, etc. <b>2119</b>		Suite, Apt. #, etc. <b>2119</b>	
City & State <b>JUPITER FLA.</b>		City & State <b>JUPITER FLA.</b>	
Zip <b>33477</b>	Country <b>USA</b>	Zip <b>33477</b>	Country <b>USA</b>
4. FEI Number <b>06-1786233</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>TURCO, RUTH 2000 PRESIDENTIAL WAY UNIT 1906 WEST PALM BEACH, FL 33401</b>		7. Name and Address of New Registered Agent Name <b>TURCO RUTH</b> Street Address (P.O. Box Number is Not Acceptable) <b>100 LAKE SHORE DRIVE #254</b> City <b>North Palm Beach FL</b> Zip Code <b>33408</b>	
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: <u><i>Ruth Turco</i></u> <span style="float: right;">3/1/2007</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. <input type="checkbox"/> Delete <b>TURCO, RUTH 2000 PRESIDENTIAL WAY, UNIT 1906 WEST PALM BEACH, FL 33401</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>IP V T S C M</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>TURCO RUTH 100 LAKE SHORE DRIVE #254 NORTH PALM BEACH FLORIDA 33408</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u><i>Ruth Turco</i></u> <b>RUTH TURCO</b> <span style="float: right;">3/1/2007 561-741-7257</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #</small>			