2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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Jun 12, 2007 8:00 am
Secretary of State
05-02-2007 90046 028 ***150.00

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1st MOORE CR2E034 (10/06)

DOCUMENT # P06000125283

1. Entity Name
ANGELS CLOTHING STORE INC.

Principal Place of Business
16841 HARRIER RIDGE PLACE
LITHIA FL 33547
US

Mailing Address
16841 HARRIER RIDGE PLACE
LITHIA FL 33547
US

2. Principal Place of Business - No. P.O. Box # 16841 Harrier Ridge Plc
Suite, Apt. #, etc. Lithia
City & State FL
Zip 33547 Country USA

3. Mailing Address 16841 Harrier Rdg Plc
Suite, Apt. #, etc.
City & State Lithia FL
Zip 33547 Country Usa

4. FEI Number 20-8629815 Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
FIGUEROA QUINONES, DANILSA
16841 HARRIER RIDGE PLACE
LITHIA FL 33547

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 Danilsa Figueroa Danilsa Figueroa President 5/20/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
P/D FIGUEROA QUINONES, DANILSA 16841 HARRIER RIDGE PLACE LITHIA FL 33547	☐ Delete
VP/T FIGUEROA QUINONES, DANILSA 16841 HARRIER RIDGE PLACE LITHIA FL 33547	☐ Delete
S FIGUEROA QUINONES, DANILSA 16841 HARRIER RIDGE PLACE LITHIA FL 33547	☐ Delete
	☐ Delete
	☐ Delete
	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Danilsa Figueroa 4/20/07 813 650 1450 hm 813 446 1450 cell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #