

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000042831

FILED  
Apr 27, 2008  
Secretary of State

Entity Name: CASUAL CHIC BOUTIQUE, INC.

## Current Principal Place of Business:

165 COSTA LOOP  
AUBUENDALE, FL 33823

## New Principal Place of Business:

108 S MAIN ST  
AUBURNDAL, FL 33823 US

## Current Mailing Address:

165 COSTA LOOP  
AUBUENDALE, FL 33823

## New Mailing Address:

165 COSTA LOOP  
AUBURNDAL, FL 33823 US

FEI Number: 26-1196899

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, CARIN S  
165 COSTA LOOP  
AUBUENDALE, FL 33823 US

## Name and Address of New Registered Agent:

JONES, CARIN S  
165 COSTA LOOP  
AUBURNDAL, FL 33823 US

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: CARIN S JONES

04/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPTS ( ) Delete  
Name: JONES, CARIN S  
Address: 165 COSTA LOOP  
City-St-Zip: AUBUENDALE, FL 33823

Title: DVP ( ) Delete  
Name: JONES, MARK D  
Address: 165 COSTA LOOP  
City-St-Zip: AUBUENDALE, FL 33823

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: JONES, CARIN S  
Address: 165 COSTA LOOP  
City-St-Zip: AUBURNDAL, FL 33823 US

Title: DVP (X) Change ( ) Addition  
Name: JONES, MARK D  
Address: 165 COSTA LOOP  
City-St-Zip: AUBURNDAL, FL 33823 US

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: CARIN S JONES

DP

04/27/2008

Electronic Signature of Signing Officer or Director

Date