

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000061680

Entity Name: PARTY BOUTIQUE, INC.

FILED
Mar 11, 2008
Secretary of State

Current Principal Place of Business:

9011 NW 190 ST
MIAMI, FL 33018

New Principal Place of Business:

Current Mailing Address:

9011 NW 190 ST
MIAMI, FL 33018

New Mailing Address:

FEI Number: 26-0277438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAVIJO, ADA E
9011 NW 190 ST
MIAMI, FL 33018 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: CLAVIJO, ADA E
Address: 9011 NW 190 ST
City-St-Zip: MIAMI, FL 33018

Title: VP () Delete
Name: CLAVIJO, EDUARDO
Address: 9011 NW 190 ST
City-St-Zip: MIAMI, FL 33018

Title: T () Delete
Name: LOZADA, JORGE W SR.
Address: 7075 NW 186 ST APT. C-211
City-St-Zip: MIAMI, FL 33015

Title: O () Delete
Name: LOZADA, JORGE W JR.
Address: 7075 NW 186 ST APT. C-211
City-St-Zip: MIAMI, FL 33015

Title: O () Delete
Name: LOZADA, ADA B
Address: 7075 NW 186 ST APT. C-211
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CLAVIJO, ADA E
Address: 9011 NW 190 ST
City-St-Zip: MIAMI, FL 33018

Title: DST (X) Change () Addition
Name: CLAVIJO, EDUARDO
Address: 9011 NW 190 ST
City-St-Zip: MIAMI, FL 33018

Title: D (X) Change () Addition
Name: LOZADA, JORGE W SR.
Address: 7075 NW 186 ST APT. C-211
City-St-Zip: MIAMI, FL 33015

Title: D (X) Change () Addition
Name: LOZADA, JORGE W JR.
Address: 7075 NW 186 ST APT. C-211
City-St-Zip: MIAMI, FL 33015

Title: D (X) Change () Addition
Name: LOZADA, ADA B
Address: 7075 NW 186 ST APT. C-211
City-St-Zip: MIAMI, FL 33015

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: ADA E CLAVIJO

P

03/11/2008

Electronic Signature of Signing Officer or Director

Date