

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P08000071101

**FILED**  
**Aug 11, 2009**  
**Secretary of State****Entity Name:** NEW TO YOU CONSIGNMENT BOUTIQUE INC**Current Principal Place of Business:**229 DEL PRADO BLVD N  
#11  
CAPE CORAL, FL 33909**New Principal Place of Business:****Current Mailing Address:**17101 PLEASURE ROAD  
CAPE CORAL, FL 33909**New Mailing Address:**1418 SW 12TH TERRACE  
CAPE CORAL, FL 33991**FEI Number:** 90-0503740**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**HABERLE, TORI  
17101 PLEASURE ROAD  
CAPE CORAL, FL 33909 US**Name and Address of New Registered Agent:**STEVENS, BILLIELEE  
1418 SW 12TH TERRACE  
CAPE CORAL, FL 33991 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: BILLIELEE STEVENS

08/11/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HABERLE, TORI  
Address: 17101 PLEASURE ROAD  
City-St-Zip: CAPE CORAL, FL 33909 US

Title: VP ( ) Delete  
Name: HABERLE, DARVIN S  
Address: 17101 PLEASURE ROAD  
City-St-Zip: CAPE CORAL, FL 33909 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: STEVENS, BILLIELEE  
Address: 1418 SW 12TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33991 US

Title: VP (X) Change ( ) Addition  
Name: STEVENS, MARK A  
Address: 1418 SW 12TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33991 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: BILLIELEE STEVENS

P

08/11/2009

Electronic Signature of Signing Officer or Director

Date