FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Feb 18 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State A DIVISION OF CORPORATIONS 1998 DOCUMENT # P28557 ADVANCED BRANDS & IMPORTING CO., INC. Principal Place of Business Mailing Address 393 TOTTEN POND ROAD 393 TOTTEN POND ROAD WALTHAM MA 02154 WALTHAM MA 02154 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/20/1990 2. Principal Place of Business 2a. Mailing Address Applied For 26 04-2717661 21 Not Applicable Suite Ant # etc. Stute Ant # etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** BAUM, CONNY EDELWEISS IMPORTS, INC. 82 Street Address (P.O. Box Number is Not Acceptable) 3765 INVESTMENT LANE 83 WEST PALM BEACH FL 33404 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELE 1E Change Addition 1.1 TITLE TITLE LEVESQUE, DOMINIQUE 1.2 NAME NAME **60 YARMOUTH RD** STREET ADDRESS 1.3 STREET ADDRESS WELLESLEY MA

1.4 CITY - ST - ZIP

2.3 STREET ADDRESS

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54 CITY-ST-ZIP

6.3 STREET ADDRESS

3.4. CITY-ST-ZIP

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21 TITLE

2.2 NAME

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5.2 NAME 5.3 STREET ADDRESS

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6.4 CITY - ST - ZIP 44. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this abund report or supplemental anison 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 fursice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADORESS

STREET ADDRESS CITY-S1-ZIP

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-7IP

CITY-ST-ZIP

DEBUS, MICHEL

STRASBURG

DEBUS, JEAN

STRASBURG

STRASBURG

DEBUS, OLIVIER

FRANCE

FRANCE

FRANCE

TITLE

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DOMINIQUE LEVESQUE / Date

781-890-3534 Daytime Phone # 0000000

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