FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200000847 (3)

FASHIONS BY ZELDA INC.

						
Principal Place of Business Mailing Address						
1976 NE 5TH AVE 1976 NE 5TH AVE						
BOCA RATON FL 33431		BOCA RATON FL 33431		DO NOT WRITE IN THIS SPACE		
U\$		US			3. Date Incorporated or Qualified	or AOL
					10/26/1992	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0372313	Not Applicable
Suite, Apt.	#, efc.	Suite, Apt. #, etc.			······································	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		,'	Trust Fund Contribution	Added to Fees
Zip			Country	/	8. This corporation owes or has paid the cur	rent vear Intangible
24	25	29	30		· · · · · · · · · · · · · · · · · · ·	∑Yes گُلُر No
	9. Name and Address of Curr	ent Registered Agent		,	10. Name and Address of New Registered	Agent
DO	LNEY, GERALDINE		81	Name		
1976 N.E. 5TH AVE			82	Street Ade	dress (P.O. Box Number is Not Acceptable)	<u> </u>
RO	CA RATON FL 33431		83			
· !			84	City		85 Zip Code
				1	FL	, '
11. Pursuant 1 office or re agent. La	to the provisions of Sections 607.0 egistered agont, or both, in the Sta m familiar with, and accept the ob	502 and 607.1508, Florida Stat i ite of Florida. Such change was igations of, Section 607.05 05 , F	utes, the abov s authorized by Florida Statute	e-named co y the corpora s.	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	f changing its registered ointment as registered
SIGNATURE						
	Signature, typed or printed name of regelered		OTE: Registered Ag	ent signature req	ured when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.	·····	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	POLNEY CECH DINE	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	DOLNEY, GERALDINE		1.2 NAME	-		+
STREET ADDRESS	10784 BOCA WOODS LN		1.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428	DELETE	1.4 CITY-5	SF-ZIP		T 60 T 14.400
TITLE			2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET			
CITY-ST-ZIP		DELETE	2. 4 CITY-	ST-ZIP		Chance Diddition
TITLE		L.J DECEIE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET			
CITY-ST-ZIP		DELET e	3.4. CITY -	ST-ZIP		Change El Addition
TITLE		€ 1 pertie	4.1 TITLE			☐ Change ☐ Addition
NAME ATTRET APPROAGO			4. 2 NAME			
STREET ADDRESS			4.3 STREET	1		
CITY-ST-ZIP		DELETE	4.4 CITY - S	ST-ZIP		Channa Addition
TITLE		← nercig	5.1 TITLE			☐ Change ☐ Addition
NAME STORES ADDRESS			5.2 NAME	4000000		
STREET ADDRESS			5.3 STREET			
CITY+ST-ZIP	- 	☐ DELETE	5.4 CITY - S	11-ZIP		☐ Change ☐ Addition
TITLE		☐ nertit	6.1 TITLE			☐ Change ☐ Addition
NAME	T.		6.2 NAME			
STREET ADDRESS	:		6.3 STREET	ADDRESS		

14. 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 annual report or supplemental annual 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