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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200006483 (1) VICTORIAN BOUTIQUE, INC.				
Principal Plac	e of Business	Mailing Address		s comment and there make social posts doug and a point broad solge ((1) (60)
1834 N UNIVERSITY DR 1834 N UNIVERSITY DR				
PLANTATION FL 33322 PLANTAION FL 3				DO NOT WRITE IN THIS SPACE
US		US		3. Date Incorporated or Qualified
				11/20/1992
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0370879 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27	77778	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year intringible
24	25 Name and Address of Current		10	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent
ME	ERBACH, IRMA		81 Name	9
	20 SW 53 ST		1(97)	MIRKYANN SCANNELL
	LAUDERDALE FL 33312		62 Street	Address (P.O. Box Number is Not Acceptable)
, ''	G 100 E 101 E 1 E 100 E		83	
ļ		\bigcirc		RRY BEACH FL.
j			84 City	FL 85 Zip Code 33,444
11. Pursuant	to the provisions of Sections 607.0502	and 607, 1508, Florida Statutes	the above named	d corporation submits this statement for the purpose of changing its registered
office or r	registered agont, or both, in the btate o im familian∖with, and∖accept the obligat	ol Florida, Such change was au tions of Section 607,0505, Flori	ithorized by the corp idanStatujes.	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
SIGNATURE			V (/	
	Signature, typed or printed name of register agent	···		re required when reinstating) DATE
12.	OFFICE(S AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	MEERBACH, IRMA	CONTROLLE .	1.1 TITLE	
NAME OTDEST ADDRESS	2920 SW 53 ST		1.2 NAME	MARYANN SCANNELL 524 N.E. 200 AVE
STREET ADDRESS	FT LAUDERDLE FL 33312		1.3 STREET ADDRESS	DELRAY BEACH - FL. 33444
CITY-ST-ZIP	TT ENODERIOEE TE GOOTE	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE	1	DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Addition
NAME		LL DELL'IL	6.2 NAME	C. Criango El Radilloli
STREET ADDRESS			6.3 STREET ADDRESS	
I SHIPLING MATERIAL			■ AV ALIVET UPAREDO	1

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119,97(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 Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY - ST - ZIP

FILED

Mar 17 1998 8:00am

Secretary of State