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FILED

May 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000027115 (3)

1. Corporation Name

ULTIMATE ACCENTS & ACCESSORIES, INC.



Principal Place of Business

1718-80TH STREET NORTH
ST. PETERSBURG FL 33710
US

Mailing Address

1718-80TH STREET NORTH
ST. PETERSBURG FL 33710-3704
US

2. Principal Place of Business

21 6 Graemoor Terrace
Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 33571
Suite, Apt. #, etc.

City & State

23 Palm Beach Gardens

City & State

28 Palm Beach Gardens

Zip
24 FL 33418

Country

Zip

29 33420

Country

30

9. Name and Address of Current Registered Agent

BRIDGES, SCOTT
1718-80TH STREET NORTH
ST. PETERSBURG FL 33710

3. Date Incorporated or Qualified

04/12/1993

3a. Date of Last Report

05/21/1996

4. FEI Number

59-3171990

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name Mitchell Bridges
82 Street Address (P.O. Box Number is Not Acceptable)
83 6 Graemoor Terrace

84 City Palm Beach Gardens FL

85

Zip Code 33418

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent's signature required when reinstating)

4/28/97

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME BRIDGES, SCOTT
STREET ADDRESS 1718-80TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG FL

TITLE VP
NAME BRIDGES, MITCHELL T
STREET ADDRESS 6 GRAEMOORE TERRACE
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE P
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE VP
3.2 NAME Ingrid Bridges
3.3 STREET ADDRESS 6 Graemoor Terrace
3.4 CITY-ST-ZIP Palm Beach Gardens, FL 33418

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

4/28/97 (510)775-9708

CR2E034 (9/96)