2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2009
Secretary of State

DOCUMENT# P93000031396

Entity Name: THE WRITE BOUTIQUE, INC.

Current Principal Place of Business:

1849 NE MIAMI GARDENS DR
NO MIAMI BEACH, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

1849 NE MIAMI GARDENS DR
NO MIAMI BEACH, FL 33179 US

New Mailing Address:

FEI Number: 65-0407140 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALMAN, MARTIN
17290 N.E. 19TH AVENUE
NORTH MIAMI BEACH, FL 33180 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: ZUCKERMAN, SHELLIE
Address: 19390 COLLINS AVE., #220
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: T ( ) Delete
Name: SCHULMAN, MICHELE
Address: 21150 POINT PLACE APT 1503
City-St-Zip: AVENTURA, FL 33180

Title: DPS (X) Delete
Name: ZUCKERMAN, SHELLIE
Address: 19390 COLLINS AVE. #220
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ZUCKERMAN, SHELLIE
Address: 19390 COLLINS AVE., #220
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: DS (X) Change ( ) Addition
Name: WOHL, JOYCE D
Address: 1849 N.E. MIAMI GARDENS DRIVE
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: SHELLIE ZUCKERMAN PRES 04/25/2009

Electronic Signature of Signing Officer or Director Date