

AMENDMENT

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

FILED

Jun 17 1998 8:00am

Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Gordon B. Norton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000040345 (9)

1. Corporation Name
HELEN'S BOUTIQUE, INC.

Principal Place of Business	Mailing Address
H.J. FRIEDMAN 7351 PROMENADE DR 6301 BOCA RATON FL 33433	H.J. FRIEDMAN 7351 PROMENADE DR 6301 BOCA RATON FL 33433

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/31/1993	4. FEI Number 65-0417538	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	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip Country	28. Zip Country

8. Name and Address of Current Registered Agent

**WALDER, THOMAS C ESO
7015 BERRACASA WAY
SUITE 201
BOCA RATON FL 33433**

91. Name	92. Street Address (P.O. Box Number is Not Acceptable)	93.	94. City	95. Zip Code
				FL

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of application

DATE Registered Agent signature required when submitting

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D.P.S.T.	1.1 TITLE	☐ Change ☐ Addition
NAME	FRIEDMAN, HELEN	1.2 NAME	
STREET ADDRESS	7351 PROMENADE DRIVE, SUITE D-301	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33433	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	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	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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6.17

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(3)(i), Florida Statutes. I further certify that the information included 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 person or persons 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 attached list with an address.

SIGNATURE: *[Signature]* 6-8-1998 P.R. B. S. D. S. T.

CR2034 (1/97)