

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P93000048910 (2)**

1. Corporation Name

**PUPPET LADY INC.**



Principal Place of Business

**2833 NE 13TH AVENUE  
POMPANO BEACH FL 33064**

Mailing Address

**2833 NE 13TH AVENUE  
POMPANO BEACH FL 33064**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30 9. Name and Address of Current Registered Agent

**CHERRY, DIANE  
2833 NE 13TH AVENUE  
POMPANO BEACH FL 33064**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified  
**07/06/1993**

3a. Date of Last Report  
**04/14/1995**

4. FEI Number  
**65-0426262**

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

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL** 85 Zip Code

11. Pursuant to the provisions of Sections 602.0502 and 602.1502, Florida Statutes, I, an above named corporation, submits this statement for the purpose of changing its registered officer 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 602.0502, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE  
NAME **D CHERRY, DIANE**  
STREET ADDRESS **2833 NE 13TH AVENUE**  
CITY-STATE-ZIP **POMPANO BEACH FL 33064**

2. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

3. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

4. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

5. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

6. TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition  
2. NAME  
3. STREET ADDRESS  
4. CITY-STATE-ZIP  
5. TITLE ☐ Change ☐ Addition

6. NAME  
7. STREET ADDRESS  
8. CITY-STATE-ZIP  
9. TITLE ☐ Change ☐ Addition

10. NAME  
11. STREET ADDRESS  
12. CITY-STATE-ZIP  
13. TITLE ☐ Change ☐ Addition

14. NAME  
15. STREET ADDRESS  
16. CITY-STATE-ZIP  
17. TITLE ☐ Change ☐ Addition

18. NAME  
19. STREET ADDRESS  
20. CITY-STATE-ZIP  
21. TITLE ☐ Change ☐ Addition

22. NAME  
23. STREET ADDRESS  
24. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 exercise the report as required by Chapter 602, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Diane Cherry*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-8-96 (805) 781-5186**

CR2E034 (12/95)