MISSIQUE 6 4 CITY - ST - 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)(k). 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.4 CITY - ST - ZIP

5 3 STREET ADORESS

63 STREET ADDRESS

54 CITY-ST-ZIP

5 1 TITLE

5.2 NAME

6 1 TITLE

62 NAME

SI	G	N	Δ	TI	IR	E

CITY - ST - ZIP

STREET AFIDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

THTLE

NAME

PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

Change

Change

Addition

☐ Addition

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171

904-222-0393 FAX

800-342-8086

2-2.



96 APR 22 MI II: 38
DIVISION OF CARGORATION

ACCOUNT NO. : 072100000032

REFERENCE : 926083 128151A

AUTHORIZATION : atricia

COST LIMIT : \$ 200.00

ORDER DATE: April 22, 1996

ORDER TIME : 9:41 AM

ORDER NO. : 926083

CUSTOMER NO: 128151A

CUSTOMER: Mr. Ariel Bentata

Bentata Hoet & Associates,

Suite 4810

200 South Biscayne Boulevard

Miami, FL 33131-2396

## ANNUAL REPORT FILING

NAME: CUTE BABIES INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Victoria L. Perez

EXAMINER'S INITIALS: