

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000065255 (0)

1. Corporation Name

DANA'S TOUCH BOUTIQUE, INC.



Principal Place of Business

Mailing Address

**790 GULFVIEW BLVD SOUTH
CLEARWATER FL 34630**

**790 GULFVIEW BLVD SOUTH
CLEARWATER FL 34630**

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

24 25 29 30

9. Name and Address of Current Registered Agent

**KOTYLAK, DANA
208 HARRISON AVE
BELLEAIR BEACH FL 34635**

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

09/15/1993

3a. Date of Last Report

04/28/1995

4. FEI Number

59-3199736

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

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 typed or printed name of registered agent and trustee agent (NOTE: Registered Agent signature must be witnessed)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**P
KOTLAK, DANA
208 HARRISON AVE
BELLEAIR BCH FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME ☐ Change ☐ Addition

13 STREET ADDRESS

14 CITY-ST-ZIP ☐ Change ☐ Addition

21 TITLE 22 NAME ☐ Change ☐ Addition

23 STREET ADDRESS

24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE 32 NAME ☐ Change ☐ Addition

33 STREET ADDRESS

34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE 42 NAME ☐ Change ☐ Addition

43 STREET ADDRESS

44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE 52 NAME ☐ Change ☐ Addition

53 STREET ADDRESS

54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE 62 NAME ☐ Change ☐ Addition

63 STREET ADDRESS

64 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 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:

Dana Kotylak

DANA KOTYLAK

4/2/96

813.443.7004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (12/95)