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

Mailing Address

P.O. BOX 8026

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

118 N METEOR

DOCUMENT # P94000016060 (3)

PRECIOUS LITTLE PEOPLE, INC.

Secretary of State 

**FILED** 

Feb 27 1997 8:00am

D CLEARWATER FL 34830 US		SUITE 307 CLEARWATER FL 34618- US	CLEARWATER FL 34618-8026		3a. Date of Last Report
9 Pripo nal fill	ace of Business	2a. Mailing Address		03/01/1994 4. FEI Number	06/11/1996
<del> </del>	age of business	28. Making Address		59-3229553	Applied For Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	-7.114	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22   City & State	!	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
7 <sub>(p)</sub>	Country 25	7 <sub>1</sub> p	Country 30	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032,  Yes No
	g, Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Ro	egistered Agent
343	FIRM OF LAWRENCE J. SP ALMERIA AMENUE IAL GABLES FL33134	EGEL CHARTERED		The Rebecco Shutrum Teet Address (P.O. Box Number is Not Accepta 118 N Hetcor -  Of Clearwater	
SIGNATURE		0592 and 207, 1508, Florida Stat the of Unrida Such change was ligations of Section 607, 0505, I August and talled applicable. (N	70	med corporation submits this statement for the corporation's board of directors. I hereby accentions are required when reinstating)	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TOTALE	P	DELETE	1.1 TOTLE		Change Addition
NAME	REBECCA SHUTRUMP	A 1 1997 A A T	1.2 NAME	İ	
STREET ADDRESS	851 BAY WAY BOULEVARD	), SUITE 307	1.3 STREET ADDR	ess [	
CITY-SI-ZIF	CLEARWATER BEACH FL	The same	1.4 CITY - ST - ZIP		T Observed The Control of the Contro
TITLE		☐ DELETE	21 TITLE		Change  Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDR	` <b>`</b>	
CHY-ST ZIP TITLE		DELETE	2. 4 CITY - ST - ZII 3.1 TITLE		Change Addition
NAME			3.2 NAME		En availe En available
STREET ADORESS			3.3 STREET ADDR	IFSS	
CHY-ST-ZIP			3.4. CITY-ST-ZIF	<b>!</b>	
11°LF		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDR	ESS	
CITY-SI-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDR	RESS	
CITY S1-ZIF			5.4 CITY-ST-ZIP		
TITLE		DELETE	6,1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDR	RESS	
CHTY - ST - ZI-			64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report of 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of charged for on an attachment with an exercise.

Date Daytime Phone #