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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000022258 (5)

BOTANIQUE, INC.

FILED Jan 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							T IMMARAMA AIM EMPAR		IRRA WALLA DIBERO ALI	11 2 11818 31881 8		
756 BEACHLAND-BLVD- VERO-BEACH-FL-32963 VERO-BEACH-FL-32963							_	o Notin	DITE IN TURA	00405		
						0.5			RITE IN THIS	SPACE		7
							ate Incorporated)3/18/1994	or Quain	iea			
2. Principal Place of Business 2a. Mailing Address							4. FEI Number			Applied For		
21 955 Treasure Lane 26 & same							65-0487475			Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.											Additional	٦
22 27							ertificate of Stat	us Desired		Fee R	equired	
City & State City & State							6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip Country Zip				Country			8. This corporation owes or has paid the current year Intangible					
24 3296	3 25 Indian River	29	30				ersonal Property				No _	4
	g. Name and Address of Current	Registered Agent		04			ame and Addre			Agent		4
> SULINO, GEORGE G OR					81 Name Sanford Mazarin							
-756-BE AGHLAND-BLVD-				82 Street	Addres	ss (P.O.	Box Number is	s Not Acce	ptable)			1
TERO BEACH FL 3296 3~				83		23	Treas	ure	Lane	<u></u>		\dashv
				00								
	1		- 1	84 City	Ve	n .	Beach		FL	85 Zip	Code 2.96.3	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with and accept the obligation	and 607.1508, Florida Statute Florida, Such change was a	es, the ab	ove-name	i corpoi	ration si	ubmits this stated and of directors.	ement for I I hereby a	he purpose o	f changing it sointment as	ts registered reaistered	
agent. I a	m familiar with and accept the obligati	ions di, Section 607.0505, Flo	rida Stati	ıtes.						1/10	1160	
SIGNATURE	& Janger VI	/Ram	T. Bustiness	A		Cuban rala	otatine)		DATE	<u>///</u>	<u> </u>	
Signature. Typed or printed name of registered agent/and titler's population. (NOTE: if 12. OFFICERS AND DIRECTORS				Registered Agent signature requirement 13.			DITIONS/CHAN	GES TO O		DIRECTOR	RS IN 12	- [
TITLE	PSTD	DELETE 1.1 T		LE	1					Change	Addition	7
NAME	MAZARIN, SANFORD		1.2 NA	ME								3
STREET ADDRESS			REET ADDRESS	95	55	Treaso	ure	Lane			Ì	
CITY-ST-ZIP	VERO BEACH FL 1.4 cm		Y-ST-ZIP	Ve	no l	Beach	TL	3296	3		_ 6	
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STREET ADDRESS	2.3		2,3 ST	REET ADDRESS								
CITY - ST - ZIP			2. 4 Ci	TY-ST-ZIP								_
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NAME			3.2 NA									
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NAME			4. 2 N/	ime Reet address								
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CITY-ST-ZIP				Y-ST-ZIP	į							
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NAME		_	6.2 NA		1							
STREET ADDRESS	•			REET ADDRESS								
CITY-ST-ZIP	-1		•	Y-ST-ZIP	}							
14 I hereby o	certify that the information supplied with	this filing does not qualify fo			ted in S	ection 1	19.07(3)(i), Flo	rida Statute	es. I further co	ertify that the	Information	1

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.