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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400029800 (7)

ALYU FASHIONS & ACCESORIES, INC.

A SEARKER FOR 1810 ENDIE CAND CONTRACTOR ACTION HERE STORY WALL ACTION

**FILED** 

Apr 29 1997 8:00am

Secretary of State

Principal Place of Business 7120 WEST 30TH AVENUE HALEAH FL 33016				Mailing Address 7120 WEST 30TH AVENUE HIALEAH FL 33018-5249							
								3. Date Incorporated or Qualified 04/18/1994		te of Last R 14/1996	leport
2. Principal Place of Business 21 B726 NW 140/N				28. Mailing Address 26. 8726NW 140CN			SW	4. FEI Number 65-0487546	Applied For Not Applicable		
Suile, Apt.	#, elc		27	Suite, Apt. #, etc.				6. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired
City & Stat	mi	FP	28	City & State Wiam	71,7	7	)	Election Campaign Financing     Trust Fund Contribution		\$5.00 Added	
24 330	16 2	Cauntry US.	29	33016	30 Co	ontr	1.5.		] Yes [	No	199.032,
		nd Address of Curren	t Regis	tered Agent				10. Name and Address of New Re	glatered /	igent	***************************************
	NZALEZ, YUN					81	Name				
7120 WEST 30TH AVENUE HIALEAH FL 33016						82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
						83	3				<del></del>
						84	City	***************************************	FL	85 Zip	Code
office or r	registered ager en familiar with	nt, or both, in the State i, and accept the obliga	of Florid Strons o	da. Such change wa f, Section 607.0505,	s authorizi Florida Sta	ed b atute	by the corporations.	oration submits this statement for the pion's board of directors. I hereby accept	t the app	changing it ointment as	ts registered registered
	Signature typicition	printed name of registered age					gent signature require	ed when reinstating)	DATE	OIDCOTOL	20 11 40
12.	PD	OFFICERS AND	) DIRF(	DELETE	13			ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	Addition
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CITY CL 26		12					פור. אוף				

supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the bit or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that lich or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

14. I do hereby certify that the information indicated on this an Lan- an officer or direct appears in Block 12 or

*30*5 823-4190