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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000055721 (2)**

1. Corporation Name

SASSY SILKS, ETC., INC.

Principal Place of Business	Mailing Address
2811 TAMIAMI TRAIL UNIT I PORT CHARLOTTE FL 33952	2811 TAMIAMI TRAIL UNIT I PORT CHARLOTTE FL 33952

3. Date Incorporated or Qualified: 07/26/1994

3a. Date of Last Report: 04/17/1995

4. FEI Number: 65-0505914 ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 23160 HARBORVIEW RD	26 23160 HARBORVIEW RD
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: PORT CHARLOTTE FL	28 City & State: PORT CHARLOTTE FL
24 Zip: 33980 25 Country: USA	29 Zip: 33980 30 Country

9. Name and Address of Current Registered Agent

FIX, DOROTHY
2811 TAMIAMI TRAIL
UNIT I
PORT CHARLOTTE FL 33952

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable): 23160 HARBORVIEW RD

83

84 City: PORT CHARLOTTE FL 85 Zip Code: 33980

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: Dorothy R Fix DOROTHY R. FIX PRES. DATE: 5/1/96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FIX, DOROTHY 2811 TAMIAMI TRAIL UNIT I PORT CHARLOTTE FL 33952	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PRESIDENT DOROTHY FIX 23160 HARBORVIEW RD PORT CHARLOTTE FL 33980	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FIX, DENNIS 2811 TAMIAMI TRAIL UNIT I PORT CHARLOTTE FL 33952	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NICOLETTI, RICHARD 2811 TAMIAMI TRAIL UNIT I PORT CHARLOTTE FL 33952	☑ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NICOLETTI, DIANA 2811 TAMIAMI TRAIL UNIT I PORT CHARLOTTE FL 33952	☑ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

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)(i), 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: Dorothy R Fix — 5/1/96 — 941-743-8062

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DOROTHY R. FIX PRES.

CR2E034 (12/95)