

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P94000083021 (3)

1. Corporation Name  
**MONIQUE'S BODY ESSENTIALS CORP.**



Principal Place of Business: 484 MANDALAY AVE SUITE C CLEARWATER FL 34630  
Mailing Address: 484 MANDALAY AVE SUITE C CLEARWATER FL 34630

3. Date Incorporated or Qualified: 11/09/1994  
3a. Date of Last Report: 09/25/1995  
4. FEI Number: 59-3277787  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: 21 84 Mandalay Ave  
Suite, Apt. #, etc: 22 Suite C  
City & State: 23 Clearwater  
Zip: 24 34630 Country: 25 USA  
2a. Mailing Address: 26 484 Mandalay Ave  
Suite, Apt. #, etc: 27 Suite C  
City & State: 28 Clw. Fl.  
Zip: 29 34630 Country: 30

9. Name and Address of Current Registered Agent

LARSON, ANABEL  
1310 GULF BLVD.  
SUITE 12A  
CLEARWATER FL 34630

10. Name and Address of New Registered Agent

81 Name: LARSON Anabel L  
82 Street Address (P.O. Box Number is Not Applicable): 1310 GULF BLVD.  
83 Suite 12A  
84 City: Clw. FL 85 Zip Code: 34630

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: Anabel LARSON  
Signature typed or printed name of registered agent in full in all capitals

May 3, 1996  
Date

12. Registered Agent of Signatory Required When Incorporating

12. OFFICERS AND DIRECTORS

TITLE	PVP	<input type="checkbox"/> DELETE
NAME	LARSON, LARSON A	
STREET ADDRESS	1310 GULF BLVD.	
CITY-ST-ZIP	CLW FL 34630	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	LARSON, ANABEL E	
STREET ADDRESS	1310 GULF BLVD.	
CITY-ST-ZIP	CLW FL 34630	
TITLE	DMC	<input type="checkbox"/> DELETE
NAME	LARSON, MONICA A	
STREET ADDRESS	1310 GULF BLVD	
CITY-ST-ZIP	CLW FL 34630	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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: Monica Ann Larson  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/3/96

(813)4619577

CR2E034 (12/95)