

P95000043645

Requestor's Name

11387 D.W. Palmetto Park Ave.  
Boca Raton, FL 33428  
City/State/Zip

600002358836--5  
-12/01/97--01069--008  
\*\*\*\*\*35.00 \*\*\*\*\*35.00  
Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 600002358836--5  
-12/26/97--01100--011
- 2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) \*\*\*\*\*26.25 \*\*\*\*\*26.25
- 3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- Walk in
- Mail out
- Pick up time \_\_\_\_\_
- Will wait
- Photocopy
- Certified Copy
- Certificate of State

FILED  
97 DEC 17 AM 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input checked="" type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Amended Annual Report

Examiner's Initials *DL* 12/17



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

December 4, 1997

LIL' RASCALS CONSIGNMENT, INC.  
11387-D W. PALMETTO PARK ROAD  
BOCA RATON, FL 33428

SUBJECT: LIL' RASCALS CONSIGNMENT, INC.  
Ref. Number: P95000043645

We have received your document for LIL' RASCALS CONSIGNMENT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.1622(7) or 617.1622(7), Florida Statutes, provides that a corporation may file an additional updated annual report. The enclosed annual report form can be used for designating the current names and addresses of the officers, directors and/or registered agent of the corporation. Please note the applicable filing fee is \$61.25.

There is a balance due of \$26.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6908.

Teresa Brown  
Corporate Specialist

Letter Number: 697A00057384

**FILE NOW: FILING FEE AFTER MAY 1<sup>ST</sup> \$550.00**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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*Amendment*

**FILED**  
**97 DEC 17 AM 11: 22**  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # PA5000043645  
 1. Corporation Name  
Lil' Rascals Consignment, Inc.

Principal Place of Business \_\_\_\_\_ Mailing Address \_\_\_\_\_

2. Principal Place of Business \_\_\_\_\_ 2a. Mailing Address \_\_\_\_\_ 3. Date Incorporated or Qualified July 8, 1996 3a. Date of Last Report \_\_\_\_\_

21 113870 W. Palmetto Park Rd. 25 22739 Horse Shoe Way 4. FEI Number 65-0589014 Applied For \_\_\_\_\_  
 Suite, Apt. #, etc. Suite, Apt. #, etc. Not Applicable

22 \_\_\_\_\_ 27 \_\_\_\_\_ 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

23 Boca Raton FL 28 Boca Raton FL 6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 33428 25 US. 29 33428 30 \_\_\_\_\_ 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

**9. Name and Address of Current Registered Agent** **10. Name and Address of New Registered Agent**

Robert Gerdung  
 22739 Horse Shoe Way  
 Boca Raton, FL 33428

81 Name Tamra Brandt  
 82 Street Address (P.O. Box Number is Not Acceptable) 113870 W. Palmetto Park Rd.  
 83 \_\_\_\_\_  
 84 City Boca Raton FL 85 Zip Code 33428

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. Each 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 Tamra Brandt Tamra Brandt 11/25/97  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**12. OFFICERS AND DIRECTORS** **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<u>Robert Gerdung</u> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<u>Jeanne Kleyman</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<u>22739 Horse Shoe Way</u>	1.2 NAME	<u>113870 W. Palmetto Park Rd.</u>
STREET ADDRESS	<u>Boca Raton FL 33428</u>	1.3 STREET ADDRESS	<u>Boca Raton, FL 33428</u>
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<u>Nancy Gerdung</u> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<u>Tamra Brandt Vice President</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<u>22739 Horse Shoe Way</u>	2.2 NAME	<u>113870 W. Palmetto Park Rd.</u>
STREET ADDRESS	<u>Boca Raton FL 33428</u>	2.3 STREET ADDRESS	<u>Boca Raton FL 33428</u>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<u>Caryn Hemmer</u> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<u>113870 W. Palmetto Park Rd.</u>	3.2 NAME	
STREET ADDRESS	<u>Boca Raton FL 33428</u>	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<u>Steven Hemmer</u> <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<u>113870 W. Palmetto Park Rd.</u>	4.2 NAME	
STREET ADDRESS	<u>Boca Raton FL 33428</u>	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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: Tamra Brandt Tamra Brandt 11/25/97 561-852-1032  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)