SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000043645 (7)

in Block 12 or Block 13 If changed, or on an attachment with an

LIL' RASCALS CONSIGNMENT, INC.



FILED Oct 01 1998 8:00am Secretary of State



11387D W PALMETTO PK RD 22739 HORSE SHOE WAY BOCA RATON FL 33428 BOCA RATON FL 33428 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/30/1995 2. Principal Place of Business 4. FEI Number 2a. Malling Address Applied For Not Applicable 21 26 65-0589014 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BRANDT, TAMRA 11387D W PALMETTO PK RD 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33428** 83 84 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1.1 TITLE DELETE Change Addition KLEYMAN, JEANNE 1.2 NAME NAME 11387D W PALMETTO PK RD STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZiP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE \_\_\_ DELETE \_\_\_\_ Addition BRANDT, TAMRA 2.2 NAME NAME 11387D W PALMETTO PK RD STREET ADDRESS 2.3 STREET ADDRESS **BOOA RATON FL 33428** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 3.1 TITLE DELETE Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 4.1 TITLE TITLE DELETE \_\_\_\_ Addition 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change \_\_\_ Addition 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I 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 odd each.