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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

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FLORIDA DEPARTMENT OF STATE

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Apr 29 1997 8:00am

Secretary of State

2/21/97 (954) 984-9626 Dayline Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000044476 (6)

FEMME FATALE LINGERIE BOUTIQUE INC.

5686 WEST SAMPLE ROAD 5686 WEST SAMPLE ROAD PEPPERTREE PLAZA PEPPERTREE PLAZA MARGATE FL 33073-3446 MARGATE FL 33073 3. Date Incorporated or Qualified 3a. Date of Last Report 06/08/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE 6 21 26 Not Applicable Suite: Apt. #. etc. Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 28 Trust Fund Contribution 23 Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \square No Zip Country $Z\phi$ 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DONATONE, AL **5148 NW 84TH ROAD** 82 Street Address (P.O. Box Number is Not Acceptable) CORAL SPRINGS FL 33067 83 84 City 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. Signal in typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. Change Addition DELETE THEF 1.1 TITLE DONATONE, AL MAVE 1.2 NAME 5148 NW 84TH RD 1.3 STREET ADDRESS STREET ADORESS CORAL SPRINGS FL 33067 C11Y - \$1 - 71P 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TILLE DONATONE, CONNIE 2.2 NAME NAME 5148 NW 84TH RD 2.3 STREET ADDRESS STREET ADORESS CORAL SPRINGS FL 33067 CITY-ST-ZE 2.4 CITY-ST-ZIP DELETE Change ☐ Addition 3 1 TITLE THILE NAME 32 NAME STREET ADDRESS **33 STREET ADDRESS** 34. CITY - ST-ZIP CHTY - S1 - Zir³ DELETE Change Addition 4.1 TITLE THE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - 7IP CITY-S1-ZIP DELETE Addition ☐ Change 51 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHY-ST-ZIP DELETE Change Addition THILE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 comporation of the receiper or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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

ent with an address

ME OF SIGNING OFFICER OR DIRECTOR