

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 14 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000074154 (2)

1. Corporation Name

POLKA DOTS, INC.

Principal Place of Business

Mailing Address

710 E. ATLANTIC AVENUE  
DELRAY BEACH FL 33483

710 E. ATLANTIC AVENUE  
DELRAY BEACH FL 33483

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/25/1995

4. FEI Number

22-3400852

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 142 S.E. 6th Ave.

Suite, Apt. #, etc.

22 A

City & State

23 Delray Bch. Fl.

Zip

24 33483

Country

25 USA

2a. Mailing Address

26 142 S.E. 6th Ave.

Suite, Apt. #, etc.

27 A

City & State

28 Delray Bch. Fl.

Zip

29 33483

Country

30 USA

9. Name and Address of Current Registered Agent

VIVENZIO, CANDACE K  
710 E. ATLANTIC AVENUE  
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 of the person named as registered agent and file it applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Candace K VIVENZIO

1/2/98

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME VIVENZIO, CANDACE K  
STREET ADDRESS 3275 FREDERICK BLVD #13  
CITY-ST-ZIP DELRAY BEACH FL

TITLE VP ☒ DELETE

NAME VIVENZIO, VINCENT  
STREET ADDRESS 629 SUN RAY COURT  
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE S ☒ DELETE

NAME VIVENZIO, DOLORES T  
STREET ADDRESS 629 SUN RAY COURT  
CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

5306 Lanes Circle #357  
Delray Bch. Fl. 33444

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

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 address.

SIGNATURE

Candace K VIVENZIO

CR2E034 (10/97)