

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000083894 (2)**

1. Corporation Name

PRINCESS BEA AUERSPERG CREATIONS, INC.



Principal Place of Business

292 S COUNTY ROAD
SUITE 201
PALM BEACH FL 33480

Mailing Address

292 S COUNTY ROAD
SUITE 201
PALM BEACH FL 33480

2. Principal Place of Business

21 **340 Royal Palm Way**

22 Suite, Apt. #, etc. **Suite 201 % Craig Kahle**

23 City & State **Palm Beach, FL**

24 Zip **33480** 25 Country **Palm Beach**

2a. Mailing Address

26 **340 Royal Palm Way**

27 Suite, Apt. #, etc. **Suite 201 % Craig Kahle**

28 City & State **Palm Beach, FL**

29 Zip **33480** 30 Country **P.B.**

3. Date Incorporated or Qualified

10/30/1995

3a. Date of Last Report

4. FEI Number

65-0614917

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

9. Name and Address of Current Registered Agent

VON RICHTHOFEN, RENE
292 S COUNTY ROAD
SUITE 201
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name **Rene' von Richtlofen**
82 Street Address (P.O. Box Numbers Not Acceptable) **166 Everglades Avenue**
83
84 City **Palm Beach** FL 85 Zip Code **33480**

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Rene' von Richtlofen

Rene' von Richtlofen

June 1/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PRESIDENT, SECRETARY, TREASURER, DIRECTOR				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
PRES., SECRETARY, TREASURER, DIRECTOR	RENE VON RICHTLOFEN	166 Everglades Ave.	Palm Beach, FL 33480	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DIRECTOR	Helen DeGray	1460 North Lake Way	Palm Beach, FL 33480	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under 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:

Rene' von Richtlofen *Rene' von Richtlofen*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 1/96

407 833-5828

CR2E034 (12/95)