

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 19, 2006 8:00 am**  
**Secretary of State**

07-19-2006 90003 002 \*\*\*150.00

**DOCUMENT # P96000017240**

1. Entity Name  
**CRUDAN'S BOUTIQUE, INC.**



Principal Place of Business  
**3581 N FEDERAL HIGHWAY  
BOCA RATON, FL 33487**

Mailing Address  
**3581 N FEDERAL HIGHWAY  
BOCA RATON, FL 33487**



07122006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0645080</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

**PRIESTLEY, NIGEL  
3581 N FEDERAL HIGHWAY  
BOCA RATON, FL 33487**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PVSD PRIESTLEY, NIGEL 3581 N FEDERAL HIGHWAY BOCA RATON, FL 33487</b>
----------------------------------------------------	--------------------------------------------------------------------------------------

TITLE NAME STREET ADDRESS CITY - ST - ZIP	
----------------------------------------------------	--

TITLE NAME STREET ADDRESS CITY - ST - ZIP	
----------------------------------------------------	--

TITLE NAME STREET ADDRESS CITY - ST - ZIP	
----------------------------------------------------	--

TITLE NAME STREET ADDRESS CITY - ST - ZIP	
----------------------------------------------------	--

TITLE NAME STREET ADDRESS CITY - ST - ZIP	
----------------------------------------------------	--

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

 Elizabeth A. Wilsman, P.A.

Certified Public Accountant

ATTACHMENT

40099949

Member AICPA  
Member FICPA

July 12, 2006

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32314

RE: Crudan's Boutique, Inc.  
#P96000017240

Dear Sir or Madam:

Our office files the Corporation Annual Reports for Crudan's Boutique, Inc. After our client received the second notice, we reviewed our files and found that the client never received the First Notice.

We are therefore enclosing the completed Corporation Annual Report, and a check for the amount of \$150.00. We respectfully request that you process this report as soon as possible.

We apologize for the inconvenience this may have caused your office and our client.

Sincerely,



Elizabeth A. Wilsman  
Certified Public Accountant

Encl.

CC: Crudan's Boutique, Inc.