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).

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

FILED

Aug 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # PORODO 1360 (0)

1. Corporatio	'S DOLLS, INC.	JUZ 1309 (9)				
Principal Place of Business Mailing Address					I IRBUHARI ING NOTUK KINU DOKU BAHU BRITI G	DITA TABET TIEBO ILINA DITIR IDEL IBOT
112 SOUTHGATE PLAZA 11 SANDY HOOK RD						
SARASOTA FL 34239 SARASOTA FL 34239						
US US					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 03/06/1996	
2. Principal P	2. Principal Place of Business 2a. Malling Address				4. FEI Number	Applied For
21 26					<u>65-0659156</u>	Not Applicable
22					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	City & State City & State 28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country Zip		Соц 30	ntry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre				10. Name and Address of New Register	ed Ag ent
MEI,	DENISE P			81 Name		
4001 S. TAMIAMI TRAIL SARASOTA FL 34231				82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
OAN	A001A 1 C 04201			83		
				84 City		- 85 Zip Code
					-	· L `
SIGNATURE	Signature, typed or printed name of registered ago			ed Agent signature requ	ation submits this statement for the purpose of on's board of directors. I hereby accept the ap	E
TITLE	DELETE		1.1 TITLE			Change Addition
NAME	MEI, DENISE P	1.2 M		ME		one age nearest
STREET ADDRESS	CADACOTA EI		1.3 STF	EET ADDRESS		
CITY-ST-ZIP			1.4 CIT	Y-ST-ZIP		
TITLE	<u></u>		2.1 TIT	LE		Change Addition
NAME	MEI, ROBERTO A		2.2 NA	ME		
STREET ADDRESS	11 \$ANDY HOOK RD SARASOTA FL		2.3 STF	EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE 3.1 TO				Change Addition
NAME			3.2 NA			
STREET ADDRESS				EETADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		L DELETE	4,1 TIT 4.2 NAI			Change Addition
NAME STREET ADDRESS			B	EET ADDRESS		}
CITY-ST-ZIP				Y-\$1-ZIP		
TITLE		DELETE	5.1 TIT			Change Addition
NAME	1		5.2 NA	1		Change Addition
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE	6.1 TIT			Change Addition
NAME		End occure	6.2 NA	i i		- Drawige - Industrial
STREET ADDRESS			1	EET ADDRESS		

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.

6.4 CITY-ST-ZIP

0-10-90