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FILED  
Mar 26 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 # P96000034026 (0)

1. Corporation Name

ANNEMARIE FASHIONS INC.

Principal Place of Business

Mailing Address

380 TAMiami TRAIL N  
NAPLES FL 34102  
US

380 TAMiami TRAIL N  
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1996

4. FEI Number

65-0662167

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

21. Principal Place of Business  
1994 E. CROWN Pt. BLVD.

2a. Mailing Address  
1994 E. CROWN Pt. BLVD.

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

23. City & State  
NAPLES, FL

28. City & State  
NAPLES, FL

24. Zip  
34112

25. Country  
USA

29. Zip  
34112

30. Country  
USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GIANNINI, ANNEMARIE M  
1994 EAST CROWN POINTE BLVD  
NAPLES FL 34112

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, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PS  
NAME ROSSMANN, ISKA  
STREET ADDRESS MEMELSTR. 22 23747 DAHME  
CITY-ST-ZIP GERMANY

TITLE VT  
NAME GIANNINI, ANNEMARIE M  
STREET ADDRESS 1994 EAST CROWN POINTE BLVD  
CITY-ST-ZIP NAPLES FL 33962

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

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP 34112

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: ANNEMARIE M. GIANNINI

*Annemarie M. Giannini* 3/19/98

941-417-8811

CR2E034 (10/97)