

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000038683

FILED  
Apr 08, 2007  
Secretary of State

Entity Name: MYSTIQUES OF SARASOTA INC.

## Current Principal Place of Business:

4523 BEE RIDGE RD  
SARASOTA, FL 34238 US

## New Principal Place of Business:

## Current Mailing Address:

2200 KINGS HWY  
PMB 63  
PORT CHARLOTTE, FL 33980 US

## New Mailing Address:

2200 KINGS HWY  
BUILDING 3L PMB 63  
PORT CHARLOTTE, FL 33980 US

FEI Number: 65-0663496

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOLTERMAN, RAYMOND  
1938 S TAMiami TRAIL  
VENICE, FL 34293 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KOLTERMAN, PATRICIA  
Address: 588 SAN AMBROSIA  
City-St-Zip: PUNTA GORDA, FL 33983

Title: P ( ) Delete  
Name: KOLTERMAN, RAYMOND  
Address: 2200 KINGS HWY., #63  
City-St-Zip: PORT CHARLOTTE, FL 33980

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: KOLTERMAN, PATRICIA  
Address: 2200 KINGS HWY., BUILDING 3 L #63  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: P (X) Change ( ) Addition  
Name: KOLTERMAN, RAYMOND  
Address: 2200 KINGS HWY., BUILDING 3 L #63  
City-St-Zip: PORT CHARLOTTE, FL 33980

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAYMOND KOLTERMAN

P

04/08/2007

Electronic Signature of Signing Officer or Director

Date