FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000038932 (5)

THE BRITISH EMPORIUM (RETAIL), INC.

| Principal Place of Business Mailing Address | | | | | | | A HEDRIOON AND HONIO DAINA OUTLAND HARA | # 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
|---|-------------------------------------|---------------------------|---|-----------------|--------------|-------------------------------------|---|--|------------------|-----------------------------|
| 150 WORTH AVE. PALM BEACH FL 33482 US | | | 150 WORTH AVE. PALM BEACH FL 33480 US | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | ļ | 3. Date Incorporated or Qualified | Ċ | | |
| 2. Principal P | lace of Busin | 000 | 2a. Mailing Address | | | | 05/06/1996 4. FEI Number | | 1 12 | oplied For |
| 21 | 1000 01 1503111 | 000 | 26 | | | | 65-0686103 | | | ot Applicable |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | | - | | - 1 - i | Additional |
| 22 | | | 27 | | | | 5. Certificate of Status Desired | | Fee Re | |
| City & State | | | City & State | | | | 6. Election Campaign Financing | | \$5.00 | May Be |
| 23 | | | 28 | | | _ | Trust Fund Contribution | | Added | |
| Zip | - | Country | Zip Country | | | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. | | | |
| 24 | _ | 25 and Address of Current | 29 30 Registered Agent | | | | Personal Property Tax due June 30. | | | |
| ADI | | TIOGISTOTO A POINT | | 81 Name | | | logiotorou A | gon | | |
| ABRAMS, BEUNDA | | | | | | | RAMS BELINDA | | | |
| 10592 WHEELHOUSE CIRCLE BOCA RATON FL 33428 | | | | | 82 Street | Addres 438 | S (P.O. Box Number is Not Accept BOCF) RIUGE CIRCO | ;able) ⊭ | | |
| DOOR HATON FE 30420 | | | | | 83 | 1 2 7 | DD-17 (Steeler Steeler | | | |
| | | | | ļ | 84 City (| | | | Joe J. Zim | Codo |
| | | | | | 84 City | 8∞ | A RATON | FL | 85 Zip (| Code 344 34 |
| 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 register 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 register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | | ls registered registered |
| SIGNATURE | 9 | sacradia Am | ams | | | | 1/1 | 18198 | | |
| | or printed name of registered agent | | | Agent signatur | e required | when reinstating) | | | | |
| 12. | <u> </u> | OFFICERS AND | DIRECTORS DELETE | 13. 1,1 Till | | 1 60 6 | ADDITIONS/CHANGES TO OFF | | DIRECTOR Change | RS IN 12 |
| TITLE NAME | P | OTEVEN | Detterie | | | ARD | DOWN BEINDA | 1 | ZZI CURURE | Manuali |
| ABRAMS, STEVEN STREET ADDRESS 10592 WHEELHOUSE CIRCLE | | | 1.2 NAME 1.3 STREET ADDRESS 94 | | QU 3 | LAMS, BELINDA 38 BOCA RILKE CIRC | ZE. | | | |
| CITY-ST-ZIP | | ATON FL | 1.4 CITY - S1 - Z1 | | | a _r | A RATEN FL 3 | 33434 | | |
| TITLE | CEO | NIONTE | ₩ DELETE | 2.1 10 | | 1000 | ,17 K1740 12 - | | Change | Addition |
| NAME | | , BELINDA | | 2.2 NA | | | | · | | |
| STREET ADDRESS | | HEELHOUSE CIRCLE | | 2.3 ST | REET ADDRESS | | | | | |
| CITY-ST-ZIP BOCA RATON FL | | | | 2. 4 CI | TY-ST-ZIP | | | | | |
| TITLE | <u> </u> | | DELETE | 3.1 TIT | LE | | | | Change | Addition |
| NAME | | | | 3.2 NA | ME | | | | | |
| STREET ADDRESS | | | | 3.3 ST | REET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | 3.4. C | TY-ST-7IP | | | | | |
| TITLE | | | ☐ DELETE | 4.1 Til | LF | | | ļ | Change | Addition |
| NAME | | | | 4. 2 N/ | ME | | | | | |
| STREET ADDRESS | | | | 4.3 ST | REET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | Y-ST-ZIP | ļ | | | <u> </u> | |
| TITLE | | | ☐ DELETE | 5.1 TIT | | | | ı | Change | L. Addition |
| NAME | | | | 5.2 NA | | | | | | |
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| CITY-ST-ZIP | _ | | DELETE | | Y - ST - ZIP | ļ | | | Change | ☐ Addition |
| TITLE | | | ן טכנפונ | 6.1 TiT | | | | ι | change | ☐ MODITION |
| NAME ATOMET ADOPTION | | | | 6.2 NA | | | | | | |
| STREET ADDRESS | | | | 6.3 \$1 | REET ADDRESS | | | | | |

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.

FILED

Jan 28 1998 8:00am

Secretary of State