

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

FILED

98 APR 30 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P96000042306 (6)

1. Corporation Name

FASHION BLUES, INC.

Principal Place of Business

Mailing Address

2200 LUCIEN WAY #450
MAITLAND FL 32751

P.O. BOX 4961
ORLANDO FL 32802
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/17/1996

4. FEI Number

59-3381646

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

2. Principal Place of Business

21 1551 Sandspur Rd.

Suite, Apt. #, etc.

22 City & State

23 Maitland, FL

24 Zip 32751 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

29 Zip 30 Country

9. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 NORTH ORANGE AVENUE #1100
ORLANDO FL 32801

10. Name and Address of New Registered Agent

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME GINSBURG, ALAN H
STREET ADDRESS 2200 LUCIEN WAY #450
CITY-ST-ZIP MAITLAND FL 32751

TITLE PST ☒ DELETE

NAME GINSBURG, ALAN H
STREET ADDRESS 2200 LUCIEN WAY STE #450
CITY-ST-ZIP MAITLAND FL 32751

TITLE VP ☐ DELETE

NAME BROCK, JAY P
STREET ADDRESS 2200 LUCIEN WAY, STE #450
CITY-ST-ZIP MAITLAND FL 32751

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D/P/S/T ☒ Change ☐ Addition

12 NAME Alan H. Ginsburg

13 STREET ADDRESS 1551 Sandspur Rd.

14 CITY-ST-ZIP Maitland, FL 32751

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE VP ☒ Change ☐ Addition

32 NAME Jay P. Brock

33 STREET ADDRESS 1551 Sandspur Rd.

34 CITY-ST-ZIP Maitland, FL 32751

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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.

Alan H. Ginsburg

04/28/98 407-741-8500

CR2E034 (10/97)