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PROFIT CORPORATION ANNUAL REPORT

1997



CLORIDA DEPARTMENT OF STATE

Sandra B. Mc⁄tham 🕏

FILED

Jun 11 1997 8:00am

Secretary of State

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074467 (7)

THE LITTLE SWISS SHOP, INC

Principal Place of Business Mailing Address 7745 JOHNSON ST. 7745 JOHNSON ST. PEMBROKE PINE FL 33024 PEMBROKE PINE FL 33024-6834 3. Date Incorporated or Qualified 3a. Date of Last Report 09/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc. Suite Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State Cily & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution П Added to Fees Zip Country Zio Country 8. This corporation has liability for intarigible tax under s. 199.032 **2** Yes 24 25 29 30 Florida Statutes [] ido 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PORTOBANCO, JORGE I 7745 JOHNSON ST. 82 Street Address (P.O. Box Number is Not Acceptable) **PEMBROKE PINE FL 33024** 83 84 City 85 Zip Code 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 (NOT) Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE Change Addition TITLE 1.1 ՄՈՆԲ PORTOBANCO, JORGE I NAME 1.2 NAME 7745 JOHNSON ST. STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINE FL 33024 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP 🔲 DELFTË 3 1 1ITLE Addition TITLE NAME 3.2 NAMI STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. City - \$1 - 7iP TITLE DELETE Change Addition 4.1 IIIUE NAME 4 2 NAME STREET ADDRESS 4.3 STHEET ADDRESS CATY-ST-ZIP 4.4 CHY-S1-7IP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 61 100 8 INAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CHY-ST-ZIP

14. I do 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 eath; that I am an officer or director of the corporation or the receiver of 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 atlactment with an address.