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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000075097 (1)

NICOLE'S GIFTS INC.

Principal	Place o	f Business
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Mailing Address

FILED May 13 1997 8:00am Secretary of State

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1556 PATRICIA AVENUE Dunedin Fl 34698		1556 PATRICIA AVENUE DUNEDIN FL 34698-4411						
					3. Date Incorporated or Qualified 09/09/1996	3a. Date o		
L '		2e. Mailing Address			4. FEI Number 59-3398986		Ar	oplied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite Apt. #. etc.			Not Applicable S8.75 Additional		
22		27			5. Certificate of Status Desired		Fee Re	
City & State	City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	7ip 29]	30 Coun	try 		🛮 Yes 🔲 N	0	. 199.032,
	9. Name and Address of Cu	irrent Registered Agent		31 Name	10. Name and Address of New R	egistered Age	<u>rt</u>	
	ORIGUEZ, MICHAEL		'					
	B PATRICIA AVENUE IEDIN FL 34698		Ī	32 Street	t Address (P.O. Box Number is Not Accepta	ble)		
DOI	ILDIN I L 04030		Į,	33				
			1	34 City		8:	eT Zin	Code
			f			FL I	,	
11. Pursuant office or r	to the provisions of Sections 607 egistered agent, or both, in the S	.0502 and 607.1508, Florida Sta State of Florida, Such change wa	tutes, the about authorized	ove-name by the co	d corporation submits this statement for the rporation's board of directors. I hereby acce	purpose of cha of the appointr	nging it	s registered registered
agent. I a	m familiar with, and accept the c	bligations of, Section 607.0505,	Florida Statu	tes.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	hi was altha w		
SIGNATURE	Signature, typed or printed name of registers	ed arrent and title if applicable (f)	OTE: Rea storad	Acren' signatu	ro required when reinstating)	DATE	•	
12.		S AND DIRECTORS	13.	- I organi	ADDITIONS/CHANGES TO OFFI		ECTOF	RS IN 12
TITLE	D	DELETE.	1.1 101	F	18/0		Change	Addition
NAME	RODRIGUEZ, MICHAEL		1.2 NAM	AE	PODRIGUEZ, MICHINEL	E.		
STREET ADDRESS	1558 PATRICIA AVENUE DUNEDIN FL 34698			eft address	PODRIGUEZ, MICHAEL 1556 PATRICIA AVENO DUNEDIN, FL 34698	ĽΕ		
CITY-ST-ZIP TITLE	DUNEDIN LT 34030	DELETE	***************************************	(-ST-ZIP	DUNEULN, FL 34690	<u></u>	Change	Addition
NAME		□ Deceir	2 1 TITU 2.2 NAM			لسا	Стапце	[_] Auuriluii
STREET ADDRESS			1	ii Let address				
CITY-ST-ZIP				Y - \$1 - 71P				
TITLE		DELETÉ	3.1101				Change	Addition
NAME			3.2 NAM	AE.				
STREET ADDRESS			3.3 STP	ELT ADDRESS				
CITY-ST-ZIP	***************************************			Y-SI-71P				
TITLE		DELETE	4,1710				Change	Addition
NAME	TE		4 2 NA					
STREET ADDRESS				EET ACIDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 CH 5.1 Tri	(-ST-ZIP		П	Change	Addition
NAME			5.2 NA				/	
STREET ADDRESS			1	 EET ADORESS				
CITY-ST-ZIP				Y-S1-ZIP				
TITLE		DELETE	G.1 TITE				Change	Addition
NAME			6.2 NA	ΑC				
STREET ADDRESS			6.3 BTF	EET AODRESS				
CITY-ST-ZIP			64 pn	7-81-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 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 MINISTER WILLIAM STEEL 4/28/9