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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000078482 (2)

LA FLEUR BOUTIQUE, INC.

Principal Place of Business	Mailing Address		i chabidat sem chaid maint mater maint and	J MBOSE IMMAN JOSEN STUMEL IMSSEM SIMI LAME	
404 INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 34640	404 INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770	404 INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770-2087		•	
			3. Date Incorporated or Qualified 09/20/1996	3a. Date of Last Report	
2. Principal Prace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26	······································	59-3400893		
Suite, Apt #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23	28	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	Added to Fees	
7ip Cour 24 33770 25	······································	Country	8. This corporation has liability for	intangible tax under s. 199.032,	
9, Name and Add	29 iress of Current Registered Agent	30	Florida Statutes L 10. Name and Address of New Re		
SWATA, BEVERLY D		81 Nan			
1469 HIGH BLUFF DRIV	Æ WEST	82 Stre	et Address (P.O. Box Number is Not Accepta	bie)	
LARGO FL 33770		83	STAGGOG (1.0. DOX POT		
			· · · · · · · · · · · · · · · · · · ·		
		84 City		FL 85 Zip Code	
11. Pursuant to the provisions of Se	ections 607.0502 and 607.1508, Florida Statute oth, in the State of Florida. Such change was a coept the obligations of, Section 607.0505, Flo	es, the above-name	ed corporation submits this statement for the	purpose of changing its registered	
agent I am familiar with, and a		rida Statutes.	orporations board or directors. Thereby acce	prine appointment as registered	
SIGNATURE YOUR				4 [18]97	
Spinatore, Typnic or primed na	OFFICERS AND DIRECTORS	13.	ture required when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12	
		1.1 TITLE		Change Addition	
NAME PRETERM	D. Swata	1.2 NAME			
STREET ADDRESS 1469 Klig	h Black Oblive and	1.3 STREET ADDRES	is .		
CHY-SI-ZIP LAYEGO,	D. Swata h Bligh Delve West FL 33770	1.4 CITY - ST - ZIP		······································	
TIME	☐ DELETE	2.1 TITLE		Change Addition	
NVWE		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRES	s		
CITY: ST: ZIP TITLE	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition	
NAME	_ print	3.2 NAME		L. Orango L. Francisco	
SINEET ADDRESS		3.3 STREET ADDRES	22		
City-St-ZiP		3.4. CITY-ST-ZIP			
THLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME		4. 2 NAME			
STREET ADORESS		4.3 STREET ADORES	\$		
C(TY-ST-ZIP		4.4 CITY - ST - ZIP			
TITLE	☐ DELETE	5.1 TITLE		Change Addition	
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRES	S		
COLY - ST - ZIF TITLE	☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition	
NAME.	L DELLE	6.1 HILE 6.2 NAME		Fill Austrille Fill Montroll	
STREET ADORESS		6.3 STREET ADDRES			
COY-SI-ZIP		6.4 CiTY - ST - ZiP	~		
14. I do hereby certify that the infor	rmation supplied with this filing does not qualif	y for the exemptio	n stated in Section 119.07(3)(i), Florida Statut	es. I further certify that the	
Lam an officer or director of the	nnual report or supplemental annual report is tre e corporation or the receiver or trustee empowers it changed, or on an attachment with an add	ered to execute th			

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