## 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** 

## **FILED** May 08 1997 8:00am Secretary of State

DOCUMENT # 1, Corporation Name	P96000082002	(2)

EYE OF	THE DESIGNER COLLECT	ION, INC.				
Principal Place	e of Business	Mailing Address	<del></del>	3 ARD HORD HAD INCH BASH COIN ABOUT DRIFT FROM SOME DEAL DELL DRIFT HOR		
ann e F LIIZME	OVIA D	300 S.E. MIZNER BLVD				
300 S.E. MIZNER BLVD   300 S.E. MIZNER BLVD   Act. 905						
BOCA RATON	FL 33432	BOCA RATON FL 33432-6039	9			
I			· · · · · · · · · · · · · · · · · · ·	3. Date Incorporated or Qualified   3a. Date of Last Report   10/03/1996		
1	ace of Business	2a. Mailing Address	11101	4. FEI Number Applied For		
21			4156	65-0696236 Not Applicable		
Suite, Apit.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired Security Securi		
City & State	)	City & State	~ 11 C1	Election Campaign Financing \$5.00 May Be		
23			TON, FL	Trust Fund Contribution		
Zip	Country	Zipilan III	Country	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29 33429-41563	0	Florida Statutes Yes No		
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Registered Agent		
KRIC	AMAN, JUDITH		81 Name			
	S.E. MIZNER BLVD . 905		82 Street	82 Street Address (P.O. Box Number is Not Acceptable)		
	A RATON FL 33432		83	,		
ı			84 City	85 Zip Code		
44 Pureuant t	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes	the above-named	corporation submits this statement for the purpose of changing its registered		
office or re	egistered agent, or both, in the State	of Florida. Such change was au	thorized by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered		
agent Lai	m familiar with, and accept the obligi	ations of, Section 607.0505, Flore	da Statutes.	·		
SIGNATURE	Signative typed or printed name of registered age	ent and tille if engineshie (NOTE I	Registered Agent signature	required when releasating) DATE		
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
THTLE	D	DELETE	1.1 TITLE	Change Addition		
NAME	KRIGMAN, JUDITH		1.2 NAME			
STREET ADDRESS	300 S.E. MIZNER BLVD APT. 8	905	1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY - ST- ZIP			
TITLE		DELETE	2.1 TITLE	Change Addition		
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS	·		
CITY - S1 - ZIP			2. 4 CITY-ST-ZIP			
THLE		☐ DELETE	3.1 TITLE	Change Addition		
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS	·		
CITY ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE	Change Addition		
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-S1-ZIP			4.4 CITY-ST-ZIP	·		
TITLE		☐ DELETE	5.1 TITLE	Change Addition		
NAME			5.2 NAME	O.A.		
STREET ADDRESS			53 STREET ADDRESS	(X,X)		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	2.2		
TITLE		DELETE	6.1 TITLE	Change Addition		
NAME			6.2 NAME	300002183863 -05/19/9701168020 ***165.00		
STREEL ADDRESS			6 3 STREET ADDRESS	-05/19/9701168020		
CITY - ST - ZIP			6.4 CITY - ST- ZIP	***165.00		

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: Valith & Kuegue air

561-362-8002