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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000088164 (4)

MISS V'S, INC.

May 04 1998 8:00am Secretary of State



| | of Business | | | | | | | |
|---|--|--|--|--|---|----------------------------|---------------------------------|-------------------------|
| 216 E AMELIA ST ORLANDO FL 32801 | | 216 E AMELIA ST | 216 E AMELIA ST Orlando Fl 32801 | | | | | |
| | | OHLANDO FL 32801 | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | 3. Date Incorporated or Qualified | | | |
| : | | | | | 10/24/1996 | | | |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | | | 4. FEI Number | | 1 1 | Applied For |
| 21 | | 26 118 Hami | 26 118 Hamlin Tlane | | | | ⊢ — | Not Applicable |
| Suite, Apt. # | #, etc. | Suite, Apt. #, etc. | · · · · · · | ,,, | 59-3405781 | | \$8.75 | Additional |
| 22 | , | 27 | | | 5. Certificate of Status Desired | | | Required |
| City & State |) | City & State | <i>,</i> | | 6. Election Campaign Financing | | \$5.0 | O May Be |
| 23 | | 28 Altamont | to Spr | ingsH | Trust Fund Contribution | | ., | d to Fees |
| Zip | Country | 28 Alfamoni | Country | , , | 8. This corporation owes or has p | aid the curr | ent vear | Intangible |
| 24 | 25 | 29 32714 | 30 SE | MINOLE | Personal Property Tax due Jun | _ | Yes | No No |
| | | Current Registered Agent | | | 10. Name and Address of New R | legistered A | gent | |
| WIN | STON, VIVIAN A | | 81 | Name | | | | |
| | CAMPUS VIEW DR | | | | (B O B D D D D D D D D D D D D D D D D D | - (- (-) | | |
| | ANDO FL 32810 | | 82 | Street Addre | ess (P.O. Box Number is Not Accepta | abie) | | |
| UNL | ANDU PL 320 IV | | 83 | | | | | |
| | | | | | | | | |
| | | | B4 | City | | FL | 85 Zi | p Code |
| | - | 007 01 00 | | L | aration automits this statement for the | | obonoine | tite registered |
| | o the provisions of Sections (| 607.0502 and 607.1508, Florida Statute | | | oration submits this statement for the | harbose or | Changing | g its registered |
| office or re | paietered agent or both, in the | ne State of Florida. Such chan ge wa s a | authorized by | / the corporation | on's board of directors. I hereby acce | ept the appo | ointment | as registered |
| office or re | paietered agent or both, in the | ne State of Florida. Such chan ge wa s a re obligations of, Section 607.0505, Flo | authorized by | / the corporation | on's board of directors. I hereby according | ept the appo | oiniment | as registered |
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indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 attackment with an address.