

FILED

03 JUL -2 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000005054 1. Entity Name BOUTIQUE ESTATES INC.					
Principal Place of Business 420 N.W. 185TH TERRACE MIAMI, FL 33169			Mailing Address 420 N.W. 185TH TERRACE MIAMI, FL 33169		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0728504	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent TAYLOR, CHARLES A 420 NW 186 TERR MIAMI, FL 33169-4426					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐	
\$5.00 May Be Added to Fees				10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P TAYLOR, CRAIG 420 NW 185TH TERR MIAMI, FL 33169		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP TAYLOR, CHARLES 420 NW 185TH TERR MIAMI, FL 33169		TITLE NAME STREET ADDRESS CITY- ST- ZIP		
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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Charles A. Taylor, Vice Pres</u> 6-29-03 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

100021406391
07/09/03--01009--008 **150.00☐ CHECK HERE IF MAKING CHANGES

CR2034 (10/02)

9/7/7

C-29-03

Dear Sir,

As for my phone call to
your Office stating that I
did not receive my 2003
Uniform Business Report.

I am asking you to please
waive the penalty. I would
really appreciate your help

Sincerely

Charles Taylor
Vice President