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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Stale 12

## DOCUMENT # P97000038771 (6)

**EFFY BETH CREATION BOUTIQUE INC.** 

## FILED Apr 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7534 S.W. 113TH COURT 7534 S.W. 113TH COURT MIAMI FL 33173 MIAMI FL 33173 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/01/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0757513 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MC GUIRE, EFFIGENIA 7534 S.W. 113TH COURT 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33173** 83 64 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered against and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change Addition MCGUIRE, EFFIGENIA NAME 12 NAME **32E034** 7534 S.W. 113TH COURT STREET ADORESS 1.3 STREET ADDRESS **MIAMI FL 33173** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE ☐ Addition TITLE 3.1 TITLE Change 3.2 NAME STREET ADDRESS **3 3 STREET ADDRESS** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ■ Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change ☐ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby 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: X

Edina Long We Line

3/19/98

305-221-0526