

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000058845

FILED
May 17, 2005
Secretary of State

Entity Name: FRANCESKA ANTIQUES OF PARIS, INC.

Current Principal Place of Business:

14750 BISCAYNE BLVD
NORTH MIAMI, FL 33181 US

New Principal Place of Business:

19291 NE 19 PLACE
NORTH MIAMI BEACH, FL 33179 US

Current Mailing Address:

14750 BISCAYNE BLVD
NORTH MIAMI, FL 33181 US

New Mailing Address:

19291 NE 19 PLACE
NORTH MIAMI BEACH, FL 33179 US

FEI Number: 65-0770963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, PAUL J
1590 N.E. 162ND ST. STE. 200
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: AKIBA, ANN F
Address: 14750 BISCAYNE BLVD
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: V () Delete
Name: AKIBA, CHARLES
Address: 14750 BISCAYNE BLVD
City-St-Zip: NORTH MIAMI BEACH, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: AKIBA, ANN F
Address: 19291 NE 19 PLACE
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: V (X) Change () Addition
Name: AKIBA, CHARLES
Address: 19291 NE 19 PLACE
City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCINE AKIBA

DPS

05/17/2005

Electronic Signature of Signing Officer or Director

Date