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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000062401 (9)

XCITING PLACE UNISEX BOUTIQUE, INC.

Principal Place	of Business	Mailing Address	Mailing Address			- I INCLUSED I INCLUSED IN THE COLOR POLICE BOND BOND BOND BOND BOND BOND BOND BOND	C OLARIA MINDIS MANINI NORT LAND		
4219 W. 16TH AVE. HIALEAH FL 33012		4219 W. 16TH AVE. HNALEAH FL 33012			DO NOT WRITE IN THIS SI	PACE			
						3. Date Incorporated or Qualified 07/17/1997			
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For		
21		26				65-0772931	Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country 25	Zip 29	30	Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 2 No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
RODRIGUEZ, JAIME 1705 W 58TH ST. HIALEAH FL 33012				81 82		s (P.O. Box Number is Not Acceptable)			
1				83					

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

City

agent Tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE Signature, typod or printed name of registured agont and title displicable. (NOTE: Registered Agent signature required when reinstating) DATE												
12.	OFFICERS AND DIR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12								
NAME STREET ADDRESS CITY-ST-ZIP	P VERAS, YOLANDO A 2615 W. 67 PL., APT. 11 HIALEAH FL 33016	□ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	VERAS, YOLANDA A. 2615 W 67 PL APT.11 HIALEAH, FL. 33016	X Change	Addition						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT RODRIGUEZ, JOSEFINA 1705 W 58TH STREET HIALEAH FL 33012-Q	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change	Addition						
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		☐ Change	Addition A						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.1 TITLE 4 2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		Change	Addition						
NAME STREET ADDRESS CITY-ST-ZIP		□ DELETÉ	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change	Addilion						
TITLE NAME STREET ADDRESS		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		☐ Change	Addition						

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:

03/37/98

(305)556-8433

FILED

Apr 01 1998 8:00am

Secretary of State

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

B5

Zip Code