2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000062813

Entity Name: A FITTING EXPERIENCE MASTECTOMY SHOPPE, INC.

FILED Feb 08, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

5816 STIRLING ROAD 1605 NORTH STATE ROAD 7 HOLLYWOOD, FL 33021 MARGATE, FL 33063

Current Mailing Address: New Mailing Address:

5816 STIRLING ROAD 1605 NORTH STATE ROAD 7 HOLLYWOOD, FL 33021 MARGATE, FL 33063

FEI Number: 65-0765969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AGAMI, BETH
2251 N W 40 TERRACE
COCONUT CREEK, FL 33066 US

AGAMI, BETH
10773 LAKE WYNDS COURT
BOYNTON BEACH, FL 33437 US

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: 02/08/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 AGAMI, BETH
 Name:
 AGAMI, BETH R

 Address:
 4902 NW 119TH TERR.
 Address:
 10773 LAKE WYNDS COURT

City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: BOYNTON BEACH, FL 33437

Title: S () Delete Title: S (X) Change () Addition Name: KRASSNER, GOLDIE Name: COLE, GOLDIE

 Name:
 KRASSNER, GOLDIE

 Address:
 3379 SW 50 STREET

 City-St-Zip:
 FORT LAUDERDALE, FL 33312

 Raddress:
 City-St-Zip:

 FORT LAUDERDALE, FL 33312
 FORT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BETH R AGAMI PRES 02/08/2006