08-06-1999 90006 037 ***550.00

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT P97000070122

TOUCHE' COUTURE, INC.

21 26 65-0776512 Not A Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Requi City & State 6. Election Campaign Financing Added to F Zip Country Zip Country 30 Intangible Personal Property. Yes N 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CLOANINGER, CHRISTINE R 2324 SARATOGA BAY DRIVE Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Add Fee Requi 6. Election Campaign Financing Address \$5.00 Ma Trust Fund Contribution Added to F 85. This corporation owes the current year Intangible Personal Property. Yes N 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	3. Date Incorporated or Qualified 08/06/1997 4. FEI Number 65-0776512 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes the current year Intangible Personal Property. 10. Name and Address of New Registered Agent
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2324 SARATOGA BAY DRIVE	
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WEST PALM BEACH FL 33409	
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84 City 77 77 85 2ip Coo	the same of the sa
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 regist	
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 regist agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.	34 City FL 85 Zip Code PL 85 Zip Code An americ comporation submits this statement for the purpose of changing its registered
	84 City FL 85 Zip Code ve-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE SIgnature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE	84 City FL 85 Zip Code ve-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	Agent signature required when reinstating) FL 85 Zip Code The Agent signature required when reinstating) Agent signature required when reinstating)
IZ. OF TOUR OF THE DIRECTIONS	784 City FL 85 Zip Code 785 Ve-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered less.
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TITLE	City FL 85 Zip Code

SIGNATURE:

CITY-ST-ZIP

6.4 CITY-ST-ZIP

14. 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 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 chapted, or on an attachment with an address.

SIGNATURE:

CLUMNATION

CLUMNATION

CLUMNATION

CLUMNATION

**Total Countries*

**Total Countries*