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 # P97000105263 (2)

HIGH HEELS PARTIES, INC.

Principal Place of Business

Mailing Address

FILED Apr 16 1998 8:00am Secretary of State



11864 SW 59 COURT 11864 SW 59 COURT COOPER CITY FL 33330 COOPER CITY FL 33330								
COOPER CIT	COOPER ON PE 3550				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					12/15/1997			
2. Principal P	lace of Business	2a. Mailing Address	. ~~		4. FEI Number		oplied For	
21 11664 5W 59 COURT 26 11664 5W 59				COURT			ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 / Fee Re		
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be	
23 COOF	ER CITY, FL.	28 COOPER	ITY.	FL	Trust Fund Contribution	Added 1		
Zip	Country	Zip	Countr		8. This corporation owes or has paid the o	current year Int	angible	
24 3B3		1-01-0-10	0 0	SA.	Personal Property Tax due June 30.		No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent		
) TE	LL O , MIGUEL G		61	Name				
11664 SW 59 COURT				82 Street Address (P.O. Box Number is Not Acceptable)				
COOPER CITY FL 33330				Olioti Nociolo (1.0.) Bolivianos in incidentalis				
	• - - · · ·		63					
			84	City		. 85 Zip	Code	
				,	F			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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, typind or printed name of registered agent			ent signature require	ed when reinstating) DATE			
12.	OFFICERS AND	DIRECTORS DELETE	13.	····	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	Addition	
TITLE	PRESIDENT		1.1 TITLE			Criange		
NAME	NOLLY M. TELLO	>'-	1.2 NAME				İ	
STREET ADDRESS	11664 SW 59 COUR	51 77 7 7 8 8		T ADDRESS				
CITY-ST-ZIP	COOPER CITY, FL &	20020	1.4 C(TY-)	S1-ZIP		Change	Addition	
TITLE	VICE PRESIDENT	☐ DELETE	2.1 TITLE			Change	☐ Maderion	
NAME	ANA T. BARRERI	7	2.2 NAME					
STREET ADDRESS	1595 SW 85 AVE	سرده در اسر اسر	2.3 STREE	1 ADDRESS			1	
CITY-ST-ZIP	PREMOROKE PANS	10, 1-6 20145	2. 4 CITY -	ST-ZIP	t -		11448	
TITLE	TREASURER/SEC	DELETE	3.1 TITLE			Change	☐ Addition	
NAME	MIGUEL G. TELL	-0	3.2 NAME					
STREET ADDRESS	11664 5W59 COV	PT	3.3 STREE	T ADDRESS				
CITY-ST-ZIP	COOPER CITY, FL		3.4. CHY-	S1-ZiP				
TALE		☐ DELETE	4.1 TITLE			Change	☐ Addition	
NAME			4. 2 NAME	:		,		
STREET ADDRESS			4.3 STREE	T ADDRESS		1 ,		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		11 <u> </u>		
TITLE		☐ DELETE	5.1 TITLE			Change	Addition	
NAME			52 NAME	ļ	< <u> </u>			
STREET ADDRESS	:		53 STREE	T ADDRESS		14/16		
CITY-ST-ZIP			5.4 C(TY-	1		// /		
TITLE		DELETE	6.1 TITLE		2000024917	Change	Addition	
NAME			6.2 NAME		-04/17/9801017	0.50 		
STREET ADDRESS				T ADDRESS	***150.00	UUU		
			6.4 CITY-		李孝孝士[5][1][1]			
CITY-ST-ZIP	l		0.4 0111-	U1 6"				

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 addition.