


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2006 8:00 am
Secretary of State

06-09-2006 90001 046 ***150.00

DOCUMENT # P98000041015 1. Entity Name MYLOU SALES, INC.					
Principal Place of Business 8468 SICILIANO ST. BOYNTON BEACH, FL 33437			Mailing Address 8468 SICILIANO ST. BOYNTON BEACH, FL 33437		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
			4. FEI Number 65-0841740		
			5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent BICKOFF, WAYNE 8468 SILCILIANO ST. BOYNTON BEACH, FL 33437			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BICKOFF, WAYNE 8468 SICILIANO ST. BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BICKOFF, SHARON 8468 SICILIANO ST. BOYNTON BEACH, FL 33437	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Wayne Bickoff</u> <u>Wayne Bickoff</u> <u>6/4/06</u> <u>561-634</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>					

50021155



05242006 Chg-P CR2E034 (11/05)

Applied For

Not Applicable

FL

Zip Code

561-634
1000



ATTACHMENT

50021155

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 24, 2006

MYLOU SALES, INC.
8468 SICILIANO ST.
BOYNTON BEACH, FL 33437

SUBJECT: MYLOU SALES, INC.
Ref. Number: P98000041015

We have received your check(s) totaling \$150.00; however, it cannot be processed and is being returned for the following:

There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

Due to the volume of mail received in this office both the annual report/uniform business report and the filing fee must be received by our office together in order to be processed.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

TINA D CARTER
OPS

Letter Number: 206A00036520

Please send us the form for
next year - this is the 2nd
time we have not received
it. Thank you
check is attached