**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Mar 30, 1999 8:00 am Secretary of State 03-30-1999 90045 018 \*\*\*150.00

**FILED** 

1999

DOCUMENT #  1. Corporation Name	P98000043871

EXECUTIVE LOOK, INC.

Principal Place of Business

Mailing Address

13130 SW 131 TERR



13130 SW 131 MIAMI FL 33186		MIAMI FL 33186		DO NOT WRITE IN THIS SPACE
				Date Incorporated or Qualifed
				05/14/1998
2 Principal Di	lace of Business # 2	_ 2a. Mailing Address	<del>- +</del>	4. FEI Number CO SII O Applied For
$\neg$ $\cdot$	2 SU) 130 TEMOU		) 130Terio	10 65-0835411 Not Applicable
21 (3136) Suite, Apt.		Suite, Apt. #, etc.	150 (01.5	5. Certificate of Status Desired   \$8.75 Additional Fee Required
22		27		
City & State	Đ . , , , , , , , , , , , , , , , , , , ,	City & State	<del></del>	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 30	0	Personal Property Tax. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
			81 Name	بالأساء المستعدم في الدالي الأستعدادي الأراب المستعدد المستعد المستعدد المستعدد المستعدد المستعدد المستعدد
	WLEY, FRANK		82 Street A	ddress (P.O. Box Number is Not Acceptable)
	30 SW 131 TERR		$\perp \perp 13$	130 SW 130 Terrace
MIAN	MI FL 33186		83	-
	•		84 City	85 Zip Code
			B4 City	1) IAM   FL   33184
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	or Fiorida. Such chande was autr	torized by the corpor	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
•	minima way, and accept the conga-			'
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agent signature rec	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	hange Addition
NAME	CRAWLEY, LOURDES		1.2 NAME	#3
STREET ADDRESS	13130 SW 131 TERR		1.3 STREET ADDRESS	13132 SW 130 TERRACE #2
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	2.1 TITLE	E Change ☐ Addition
NAME	CRAWLEY, FRANK	_		
			2.3 STREET ADDRESS	1313QSW 130 TERRACE +2
STREET ADDRESS	13130 SW 131 TERR		2.4 CITY-ST-ZIP	1
CITY-ST-ZIP	MIAMI FL 33186	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
TITLE			3.2 NAME	
NAME	المسابق والمعالم المناسبين والمراس	للمالية المراجعينيات المرازية أأكار	3.2 NAME 3.3 STREET ADDRESS	ا المنظم المعالم
"STREET ADDRESS				The second secon
CITY-ST-ZIP		□ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	☐ Change ☐ Addition
TITLE		□ perrie		
NAME	·		4. 2 NAME	•
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		ET ACTOR	4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE	. Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		1.2.	5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS.			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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 changed, or on any attachment with an address, with all other like empowered.

SIGNATURE: