

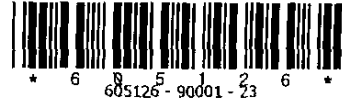
**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**


FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**  
**Jun 30, 1999 8:00 am**  
**Secretary of State**

06-30-1999 90011 010 \*\*\*150.00

**DOCUMENT #** 998000060848  
 1. Corporation Name  
ALY'S FASHION HANDBAGS



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

7/24/98

4. FEI Number

65-0851852
☐ Applied For  
☐ Not Applicable
5. Certificate of Status Desired ☐
**\$8.75** Additional  
 Fee Required
6. Election Campaign Financing  
 Trust Fund Contribution ☐
**\$5.00** May Be  
 Added to Fees
8. This corporation owes the current year intangible  
 Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AZUCENA MORALES R  
8260 S.W. 34 TERR.  
MIAMI FL. 33155

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, 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 AZUCENA MORALES
Azucena Morales R  
 (NOTE: Registered Agent signature required upon reinstating)
6/22/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Azucena Morales R  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/22/99

Daytime Phone #

CR2E034 (11/98)

P98000060848  
~~605126~~ 605126-9000123

7/15/99

TO WHOM IT MAY CONCERN:

ON JUNE 14 1999 I CALLED YOUR OFFICES FOR AN APPLICATION FORM ON REGISTERING MY FRANCHISE. I SPOKE TO ONE OF YOUR OPERATORS ON THE COST FOR SUBMITTING MY APPLICATION AND THE FORMS I NEED TO FILL OUT. I WAS NOT AWARE THAT THE MAY DEADLINE HAD ALREADY PASSED BECAUSE I WAS NEVER SENT A NOTICE REGARDING REGISTERING MY FRANCHISE AND ON THE DEADLINES AND THE PENALTY CHARGE AFTER MAY 1<sup>ST</sup> 1999. AS YOU CAN SEE THROUGH MY APPLICATION AS WELL THAT MY BUSINESS HAS ONLY BEEN IN EXISTENCE FOR ALMOST A YEAR. I WOULD LIKE TO ADD THAT THE OPERATOR THAT HANDLED MY PHONE CALL AND SUBMITTED MY APPLICATION TOLD ME THAT I DID NOT HAVE TO WORRY ABOUT PAYING THE EXTRA FEE AFTER MAY; BECAUSE I DID NOT RECEIVE THE APPLICATION ON TIME AND INSTEAD I HAD TO CALL YOUR OFFICES TO GET ONE.

I HAVE SUBMITTED THE RECENT LETTER YOU SUBMITTED TO ME. THANK YOU FOR YOUR TIME AND PATIENCE AND I HOPE THIS SITUATION WILL BE RECTIFIED.

SINCERELY YOURS,

*Alicia Morales R. &*  
*Aly's Fashion - President.*