PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P98000067226

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90031 034 ***150.00

ma vie	EN LINGERIE, INC.						
Principal Plac	e of Business	Mailing Address			\$ 1001(1002 114 10101 1011)	/ BBEID BILL 18818 1181	9 (3)(40 9)31 (40)
1777 DAYTONA	A ROAD	1777 DAYTONA ROAD					
MIAMI BEACH FL 33141 MIAMI BEACH FL 33141					DO NOT WRITE IN THIS SPACE		
						THIS SPACE	
					3. Date Incorporated or Qualifed		Į
1 0 : : : : :	N	2a. Mailing Address			07/31/1998 4. FEI Number	_	pplied For
Z. Principal P	Place of Business MIRACLE MIL	•			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	\mathcal{L}	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.				\$8.75	Additional
	L'Gables FL.	27			5. Certifcate of Status Desired	•	equired
City & Stat		City & State			6. Election Campaign Financing	\$5.00	May Be
23 331		28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country		8. This corporation owes the current ye	ar Intangible	
24	25	29	30		Personal Property Tax.	¥Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	ered Agent	
			81	Name			
	DEMEIER, HERMAN W SR.		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	7 DAYTONA ROAD		1	Oli Coli Add			
MIA	MI BEACH FL 33141		83				
			84	City		85 Zip	Code
			"	City		FL S	
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	e of Florida. Such change was au ations of, Section 607.0505, Flori	ithorized by ida Statutes	the corporat	rporation submits this statement for the purpo- tion's board of directors. I hereby accept the a	se of changing its appointment as re	s registered egistered
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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:

BREDEHER HER HANN 1-1599