**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # P98000070422

1. Corporation Name

DANA'S BOUTIQUE, INC.

Principal Place of Business

Mailing Address

## May 04, 1999 8:00 am Secretary of State

05-04-1999 90009 038 \*\*\*150.00



		1261 GULF BLVD. SUITE CLEARWATER FL 33767			DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualifed 08/10/1998		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		pplied For
21	•	26			59-3536705		lot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27		٠ ـ - ـ	5. Certificate of Status Desired	Fee F	gednited
City & Sta	te	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Zip .	Country 25	Zip 29	Counti	у	This corporation owes the current ye     Personal Property Tax.	ar Intangible ☐ Yes	<b>№</b> мо
	9. Name and Address of Cu	ırrent Registered Agent			10. Name and Address of New Regist	ered Agent	
			8	1 Name			]
PRIVITERA, PETER J 447 3RD AVENUE NORTH SUITE 203				82 Street Address (P.O. Box Number is Not Acceptable)			
ST.	PETERSBURG FL 33701		8	3			
	•		8	4 City	<u></u>	85 Zip	Code -
	·			1		<u>FL                                     </u>	
office or I	registered agent, or both, in the Si	.0502 and 607.1508, Florida Statut state of Florida. Such change was a bligations of, Section 607.0505, Flo	uthorized b	y the corporati	poration submits this statement for the purpoint's board of directors. I hereby accept the	se of changing it appointment as r	s registered egistered
SIGNATURE	Signature, typed or printed name of registere	ed agent and title if applicable. (NOTE	: Registered Ag	ent signature require	ed when reinstating) DA	TE	
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
TITLE		DELETE	1.1 TITLE	TA	RESIDENT	Change	•
NAME	1	_	1.2 NAME	2	AWA KOTYLAK		1 1
				ET ADDRESS 119	9 13th street		
STREET ADDRESS			E.	27.70	elleair Beach FL 3378	h	
CITY-ST-ZIP	<del></del>	☐ DELETE	1.4 CITY- 2.1 TITLE		EIRAN DEACH 10 33.5	☐ Change	Addition
TITLE		- Deterie				Griding-	
NAME			2.2 NAME	l l			-{
STREET ADDRESS				ET ADDRESS	. :		[
ČITY-ST-ZIP		- Det ete		ST-ZIP		Channa	□ Addition
TITLE	1	DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME	]*	•		
STREET ADDRESS			3.3 STRE	ET ADDRESS			ļ
CITY-ST-ZIP			3.4, CITY	ST-ZIP			
TITLE	,	☐ DELETE	4.1 TITLE			Change	Addition
NAME	<b>\</b>		4.2 NAM	:			}
STREET ADDRESS			4.3 STRE	ET ADDRESS			}
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				ĺ
STREET ADDRESS	,		5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ì			j
TITLE		☐ DELETE	6.1 TITLE			☐ Change	■ Addition
NAME			6.2 NAME		•	_ •	J
P. A	نہ ہا۔						
STREET ADDRESS	$\int_{\mathbb{R}^{N}} d^{n} d^{$		6.3 STRE	ET ADDRESS			

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.

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