2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 14, 2005 08:00 AM **DOCUMENT # P99000087470 Secretary of State** MADAME'S CLOSET, INC. Principal Place of Business Mailing Address 7840 WOBURN ST. 7840 WOBURN ST. NEW PORT RICHEY, FL 34653 **NEW PORT RICHEY, FL 34653** 01112005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3603362 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent LOGUE, KATHERINE DO NOT WRITE 7840 WOBURN ST. NEW PORT RICHEY, FL 34653 IN THIS SPACE 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_____Signature, typed or printed name of registered eigent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS LOGUE, KATHERINE NAME STREET ADDRESS 7840 WOBURN ST NEW PORT RICHEY, FL 34653 CITY-ST-ZIP TITLE NAME LOGUE, NEAL E 01/14/05-80041-002 150.nn 7840 WOBURN ST STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 34653 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. 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 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 of 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 attachpent with an address, with all other like approved. A THERINE LOGUE

STREET ADDRESS CITY-ST-ZIP