FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Aug 08, 2001 8:00 am DOCUMENT # P99000092976 Secretary of State Entity Name THE GARDEN BOUTIQUE, INC. 08-08-2001 90006 001 ***150.00 Principal Place of Business Mailing Address 1356 N.W. 122ND TERRACE 1356 N.W. 122ND TERRACE PEMBROKE PINES FL 33026 PEMBROKE PINES FL 33026 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 65-0962481 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HENRIQUEZ, TANYA Street Address (P.O. Box Number is Not Acceptable) 1356 N.W. 122ND TERRACE PEMBROKE PINES FL 33026 Zip Code FL 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$580.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (5/01) TITLE TITLE ☐ Change ☐ Addition Delete HENRIQUEZ, TANYA NAME NAME STREET ADDRESS CR2E034 STREET ADDRESS 1356 NW 122 TERR PEMBROKE PINES FL 33026 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change ☐ Addition ☐ Delete NAME SANCHEZ, LEONEL NAME STREET ADDRESS 1356 NW 122 TERR STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES FL 33026 CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 it 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

AHACK Ment # P990000979760 A0080099

July 27, 2001

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

RE:

UNIFORM BUSINESS REPORT

Please be advised that I filed the above mentioned report prior to May 1, 2001 electronically and it was not received by your office. I spoke with a representative of your office and was advised to mail a check in the amount of \$150.00 along with the signed UBR and this letter.

Should you have any questions, please feel free to contact me.

Regarrds,

Tanya Heñribue (954)438-6631

Encl.