## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

250 RACQUET CLUB RD FT LAUDERDALE FL 33326



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

; Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S05013

(5)

FIFTH AVENUE BOUTIQUES, INC.

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Mailing Address

11111 BISCAYNE BLVD STE 4847 / 0 5 4 MIAMI FL 33181-3404 FILED Mar 14 1997 8:00am Secretary of State

US								3. Date Incorporated or Qualified 3a. Date of Last Report 06/06/1996				
2. Principal P	Place of Busines	<u> </u>	2a. Mairing Address					4. FEI Number			pplied For	
21			26					65-0220444			of Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.							Additional	
22		27					5. Certificate of Status Desired			equired		
City & State	te	City	City & State				6. Election Campaign Financing \$5.00 May Be					
23		28	18				Trust Fund Contribution Added to F			to Fees		
Zip	Country			Z(pCOunt				8. This corporation has liability for intangible tax under s. 199,032,				
24	25	29	30				Florida Statutos 🔀 Yes 🗌 No					
		d Address of Currer	it Registere	d Agent				10. Name and Address of New Re	gistered A	gent		
WIL	SON, CAROL				i	<b>81</b> Na	une					
11111 BISCAYNE BLVD #1 <del>217-</del> /054 APARTMENT NO. 1217						82 Street Address (P.O. Box Number is Not Acceptable)						
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MIA	MI FL 33181						83					
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						<b>84</b> Ci	ıy		FL	85 Zip	Code	
office or re agent. I a	registered agent	s of Sections 607,050 , or both, in the State and accept the obligi	of Fiorida, S	Such change was a	authorized	I by the	med corp corporati	oration submits this statement for the pion's board of directors. Thereby acce	ourpose of plathe appo	changing i	ts registered registered	
SIGNATURE	Signature, typed or p	orded happe of a gest rest age			E Hegistero:	Agent sig	radure requés	ed when reinstaluig)	DAT	971		
12.		OFFICERS AN	D DIRECTOR	RS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	RS IN 12	
TITLE	D			DETETE	1118	11				Change	Addition	
NAME	WILSON, C				1.2 NA	Mt						
STREET ADDRESS		IET CLUB RD			1,3 \$1	REET ADOR	ESS					
CITY-ST-ZIP	FT LAUDER	DALE FL			1.4 01	Y - S1 - 7 P						
TITLE				DEFETE	2110	11				Change	Addition	
NAME					2.2 NA	Mi						
STREET ADDRESS	}				2.3 S1	REET ADDR	rss }					
CITY-ST-ZIP	1				2 4 CI	TY-\$1-7#						
TITLE				DELETE	3 : 111	Li	1			Change	Addition	
NAME					3 2 NA	ME						
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CITY-ST-ZIP	}					IY - ST - Zif	1					
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CITY-ST-ZIP						Y-ST-70						
TITLE				DELETE	51111					Change	Addition	
NAME					5.2 NA							
STREET ADDRESS						RELT ACKUR	221					
-CITY-ST-ZIP	<b>[</b>				1	1Y - 51 - ZiP						
TITLE	<del></del>			DELLIE	61 TIT					Change	Addition	
NAME I	ļ			b	6.2 NA					o.m.g.	E-1 Frontion	
1	1											
STREET ADDRESS	į					POCA 1338	192					
CITY-ST-ZIP	by cortify that the	o intermedian cues des	Smith this G	ing door and evel		Y-S1-711		in Coation 110 07(3\(i)) Florida Stat da	n I fuelle e -	actif. dl -	the.	
14. I do hereb	by certify that the	e information supplier his annual report or s	d with this file upplemental	ing does not qualif Lannual report is t	v for the	exempti	on stated and that	in Section 119.07(3)(i). Florida Statute my signature shall have the same lega	s. I further	certify that if made un	the derivation th	

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 path; 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.

SIGNATURE: Carol alilam

7/10/97

305-893-1876