FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

FILED

95 MAY -1 AM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S06648** **(7)**

1. Corporation Name
CHANTELLE ORIGINALS, INC.

Principal Place of Business	Mailing Address
5358 SPRING HILL DRIVE SPRING HILL FL 34606	5358 SPRING HILL DRIVE SPRING HILL FL 34606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/12/1990**
3a. Date of Last Report: **04/20/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
County — 25 / 30

4. FEI Number: **59-3078184** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CHARNOCK, WILLIAM T., III
5358 SPRING HILL DRIVE
SPRING HILL FL 34606

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section(s) 607.1007 and 607.1008, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of Section(s) 607.0505, Florida Statutes.

SIGNATURE(S) — Date

12. OFFICERS AND DIRECTORS

01 Title	D
02 Name	MCLEAN, JOHN
03 Street Address	70, ELM GROVE
04 City, St, Zip	PORTSMOUTH, ENGLAND
11 Title	
12 Name	
13 Street Address	
14 City, St, Zip	
21 Title	
22 Name	
23 Street Address	
24 City, St, Zip	
31 Title	
32 Name	
33 Street Address	
34 City, St, Zip	
41 Title	
42 Name	
43 Street Address	
44 City, St, Zip	
51 Title	
52 Name	
53 Street Address	
54 City, St, Zip	
61 Title	
62 Name	
63 Street Address	
64 City, St, Zip	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

01 Title	☐ Change ☐ Addition
02 Name	
03 Street Address	
04 City, St, Zip	
11 Title	☐ Change ☐ Addition
12 Name	
13 Street Address	
14 City, St, Zip	
21 Title	☐ Change ☐ Addition
22 Name	
23 Street Address	
24 City, St, Zip	
31 Title	☐ Change ☐ Addition
32 Name	
33 Street Address	
34 City, St, Zip	
41 Title	☐ Change ☐ Addition
42 Name	
43 Street Address	
44 City, St, Zip	
51 Title	☐ Change ☐ Addition
52 Name	
53 Street Address	
54 City, St, Zip	
61 Title	☐ Change ☐ Addition
62 Name	
63 Street Address	
64 City, St, Zip	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: — 4/26/95

SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR AUTHORIZED OFFICER OR DIRECTOR — Date

0388451 CP