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Mar 26 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S81763 (2)

1. Corporation Name
KISMET A BOUTIQUE, INC.



Principal Place of Business

7211 CENTRAL AVE
SUITE 401
S. PASADENA FL 33710
US

Mailing Address

7211 CENTRAL AVE
SUITE 401
S. PASADENA FL 33710-7413
US

3. Date Incorporated or Qualified
09/20/1991

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 16725 GULF BLVD.

Suite, Apt. #, etc.

22 N. REDINGTON BEACH

City & State

23 FL.

Zip

24 33708

Country

25 PINALAS

2a. Mailing Address

26 16725 GULF BLVD.

Suite, Apt. #, etc.

27 N. REDINGTON BEACH

City & State

28 FL.

Zip

29 33708

Country

30 U.S.

4. FEI Number
59-3084444

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 s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

TEPPER, KAREN
7211 CENTRAL AVE
SUITE 215
ST PETERSBURG FL 33710

10. Name and Address of New Registered Agent

81 Name KAREN TEPPER
82 Street Address (P.O. Box Number is Not Accepted) 16725 GULF BLVD.
83 N. REDINGTON BEACH
84 City

FL 85 Zip Code 33708

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE KAREN TEPPER PRES.

(NOTE: Registered Agent signature required when reinstating)

2/21/97

DATE

12. OFFICERS AND DIRECTORS

TITLE	SD	☒ DELETE
NAME	HARRIS, EDITH	
STREET ADDRESS	6130 8TH AVE N.	
CITY - ST - ZIP	ST. PETERSBURG FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRES	☐ Change ☐ Addition
1.2 NAME	KAREN TEPPER	
1.3 STREET ADDRESS	16725 GULF BLVD	
1.4 CITY - ST - ZIP	N. REDINGTON BCH FL 33708	
2.1 TITLE	SD	☒ Change ☐ Addition
2.2 NAME	KAREN TEPPER	
2.3 STREET ADDRESS	16725 GULF BLVD.	
2.4 CITY - ST - ZIP	N. REDINGTON BCH FL 33708	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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.

SIGNATURE:

KAREN TEPPER Pres 2/21/97 813-319-8800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)