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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$99176

(7)

BATH & BOUDOIR FASHIONS, INC.

DAIN	a boodoin fashions, inc	<i>j</i> .						
Principal F	Tace of Business	Mailing Address				DICH CIDII CIDII SIDII SIBH I		
27001 US 19 NORTH STE 2005 CLEARWATER FL 34621		13345 GOLF CREST CIR. TAMPA FL 33624-4648 US						
US					3. Date Incorporated or Qualified 01/01/1992	3a. Date of Last Re 04/29/1996	eport	
<u> </u>	al Place of Business	28. Mailing Address			4. FEI Number		plied For	
Sude A	1				59-3097044		t Applicable	
22		mana			Certificate of Status Desired	\$8.75 A		
	City & State City & State		9		6. Election Campaign Financing \$5.00 May Be			
23	28				Trust Fund Contribution	Added t		
Zip			Country	/		8. This corporation has liability for intangible tax under s. 199,032,		
24	25 Same and Address of Curre	25 29 30 9. Name and Address of Current Registered Agent			Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	ONG, WANN S.	in registereo Agent	81	Name	IU, HAIRE BING AGGIESS OF NEW RE	Distated Wout		
13345 GOLF CREST CIR.								
TAMPA FL 33824			82	Street	Address (P.O. Box Number is Not Acceptable)			
			83			*****		
			84	City		85 Zip (Code	
				FL M M				
11. Pursu office agent	ant to the provisions of Sections 607.05 or registered agent, or both, in the Stali I am familiar with, and accept the obliq	02 and 607.1508, Florida Statute e of Florida. Such change was a gations of, Section 607.0505, Flo	es, the abovi uthorized by rida Statute	e-named y the corp s.	corporation submits this statement for the poration's board of directors. I hereby acception	urpose of changing its at the appointment as	s registered registered	
SIGNATUI	RE							
12.	Signature, type for protect name of registered agent and to ell'applicable INOTE OFFICERS AND DIRECTORS			ent signature	required when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	C IN 12	
TOTALE	DELETE		13.		ADDITIONS/CHANGES TO OFFIC	Change	Addition	
NAME	JONG, WANN S.		1.2 NAME					
STREET ADDRE	13345 GOLF CREST CIRCLE		1.3 STREET	F ADDRESS				
CHY-ST ZIP	TAMPA FL		1.4 CITY - ST - ZIP					
THEE	D			,		Change	Addition	
NAME	TAMPA FL		2.2 NAME 2.3 Street address					
STREFT ADDRE								
CITY - ST - 7IP			2 4 CITY-	ST-ZIP			7 1 115	
TITLE NAME			31 TITLE			☐ Change	Addition	
STREET ADDRE			3.2 NAME 3.3 STREET	r atimbree				
City-St-ZiF	1.3.1		1					
THE	☐ DELEYE		3.4. CITY -:	51-ZIP		Change	Addition	
NAME			4.2 NAME					
STREET ADDRE	ss			ADDRESS				
City - St - 7IP			4.4 CITY - S					
1111.5	☐ DELETE		5.1 TITLE		. =	Change	Addition	
NAME			5.2 NAME					
STREET ADDRE	SS		5.3 STREET	ADDRESS				
C11Y - S1 - Z1P		I BELEVE	5.4 CITY - S	ST-71P	***************************************		—	
TITLE		☐ DELETE	6.1 TITLE	ļ		Change	Addition	
NAM t	į		6.2 NAME	I				

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.

6.3 STREET ADDRESS 6.4 City-St-Zip

SIGNATURE:

STREET ADDRESS

AND TYPED OR PROTECTION OF PROTECTION OFFICER OR DIRECTOR

BCNR 2

18/97

FILED

Feb 27 1997 8:00am

Secretary of State