

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED

95 JUL 28 AM 9:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **V55381** (0)  
1. Corporation Name  
**CLOTHING BOUTIQUE, INC.**

Principal Place of Business Mailing Address  
8150 S.W. 8TH ST. #203 MIAMI FL 33144  
8150 S.W. 8TH ST. #203 MIAMI FL 33144

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/05/1992** 3a. Date of Last Report **06/03/1994**  
4. FEI Number **65-0355448** 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

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

9. Name and Address of Current Registered Agent  
**BLANCO, SERAFIN, JR.**  
8150 S.W. 8TH ST.  
#203  
MIAMI FL 33144

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 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 \_\_\_\_\_  
(Signature, typed or printed name of registered agent and this figure of a \_\_\_\_\_ (Typed Registered Agent signature required when not using DATE)

12. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	BLANCO, SERAFIN, JR
STREET ADDRESS	8150 S.W. 8TH ST #203
CITY ST ZIP	MIAMI FL 33144
TITLE	TD
NAME	BLANCO, SERAFIN, SR
STREET ADDRESS	8150 S.W. 8TH ST #203
CITY ST ZIP	MIAMI FL 33144
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY ST ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY ST ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY ST ZIP	

14. I, the undersigned, certify that the information reported with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(2)(b), 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 checked as a person attached with an address.

SIGNATURE: *Serafin Blanco Jr.* SERAFIN BLANCO JR. 7/19/95 887-200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Signature Number)