

Apr-30-04 02:18P


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90411 021 ***150.00

DOCUMENT # P03000051058

1. Entity Name
DEFINITELY YOU, INC.



Principal Place of Business Mailing Address

2378 WESTON ROAD **350 RACQUET CLUB ROAD**
WESTON, FL 33330 US **WESTON, FL 33330 US**

94080030



04192004 Chg-P CR2E034 (10/03)

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. Filing Number Applied For

20-0019162 Not Applicable

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

6. Name and Address of Current Registered Agent

RANDALL, LINDSAY
350 RACQUET CLUB ROAD
WESTON, FL 33330

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature of person or officer named as registered agent or both, if applicable. (NOTE: Registered Agent signature required when making a change.)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete MALPICA, WINFREDO 2810 SW 87TH AVENUE DAVIE, FL 33328	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP	<input type="checkbox"/> Delete LEMMERMAN, MICHAEL 14631 SW 16TH STREET DAVIE, FL 33325	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE O	<input type="checkbox"/> Delete KORNREICH, BARRY 15021 WATERFORD DRIVE DAVIE, FL 33331	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE O	<input type="checkbox"/> Delete MALPICA, LINDSAY 350 RACQUET CLUB RD. BLDG. 122, APT. 104 WESTON, FL 33326	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or in an attachment with an address, with all other filers empowered.

SIGNATURE: *Lindsay Malpica* 4/30/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR