

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000131978

FILED
Apr 29, 2008
Secretary of State

Entity Name: FASHION LOVING INDIVIDUAL, INC.

Current Principal Place of Business:

3404 S. VIRGINIA COURT
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

3404 S. VIRGINIA COURT
TAMPA, FL 33629

New Mailing Address:

FEI Number: 80-0137577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, MANUEL J
109 NORTH BRUSH STREET, SUITE 500
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALENTI, ANGIE
Address: 3404 S. VIRGINIA COURT
City-St-Zip: TAMPA, FL 33629

Title: V () Delete
Name: VALENTI, RUSSELL
Address: 3404 S. VIRGINIA COURT
City-St-Zip: TAMPA, FL 33629

Title: V () Delete
Name: GENTRY, DORIS
Address: 1870 HOLLY HURST DR
City-St-Zip: AVON PARK, FL 33825

Title: V () Delete
Name: GOOD, CYNTHIA
Address: 3614 W SAN LUIS
City-St-Zip: TAMPA, FL 33629

Title: V () Delete
Name: JONES, GRAHAM
Address: 3614 W SAN LUIS
City-St-Zip: TAMPA, FL 33629

Title: V () Delete
Name: VALENTI, JAKE
Address: 3614 W SAN LUIS
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELA VALENTI

CEO

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date