

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000006477

Entity Name: INSPIRATIONAL BRACELETS INC.**Current Principal Place of Business:**6 OSPREY COURT
OCEAN RIDGE, FL 33435**Current Mailing Address:**6 OSPREY COURT
OCEAN RIDGE, FL 33435 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
5575 S. SEMORAN BLVD.
SUITE 36
ORLANDO, FL 32822 US*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**Officer/Director Detail :**

Title	PRESIDENT, DIRECTOR
Name	BULGER, ADELE
Address	6 OSPREY COURT
City-State-Zip:	OCEAN RIDGE FL 33435

Title	D, TREASURER
Name	BULGER, DAVID
Address	6 OSPREY COURT
City-State-Zip:	OCEAN RIDGE FL 33435

Title	SECRETARY, DIRECTOR
Name	BULGER, MAGGIE
Address	6 OSPREY COURT
City-State-Zip:	OCEAN RIDGE FL 33435

Title	DIRECTOR
Name	BULGER, GEORGE Z
Address	6 OSPREY COURT
City-State-Zip:	OCEAN RIDGE FL 33435

Title	DIRECTOR
Name	BULGER, HEIDI
Address	6 OSPREY COURT
City-State-Zip:	OCEAN RIDGE FL 33435

I hereby 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 all other like empowered.

SIGNATURE: ADELE BULGER

AMBR

04/09/2021

Electronic Signature of Signing Officer/Director Detail_____
Date