

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004464

FILED
Apr 16, 2008
Secretary of State

Entity Name: QUEEN FOR A DAY, INC.

Current Principal Place of Business:

3289 THOREAU AVE.
TALLAHASSEE, FL 32311

New Principal Place of Business:

2467 RAIN LILY WAY
TALLAHASSEE, FL 32311

Current Mailing Address:

3289 THOREAU AVE.
TALLAHASSEE, FL 32311

New Mailing Address:

2467 RAIN LILY WAY
TALLAHASSEE, FL 32311

FEI Number: 64-0928748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, JENNA
1848 SW 11TH TERRACE
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

EDWARDS, JENNA
1016 NE 4TH STREET
HALLANDALE, FL 33009 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:

04/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: EDWARDS, JENNA
Address: 1848 SW 11TH TERRACE
City-St-Zip: MIAMI, FL 33135

Title: VP () Delete
Name: EDWARDS, DEBBIE
Address: 3289 THOREAU AVE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: EDWARDS, TOM
Address: 3289 THOREAU AVE.
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: EDWARDS, JENNA
Address: 1016 NE 4TH STREET
City-St-Zip: HALLANDALE, FL 33009

Title: VP (X) Change () Addition
Name: EDWARDS, DEBBIE
Address: 2467 RAIN LILY WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: D (X) Change () Addition
Name: EDWARDS, TOM
Address: 2467 RAIN LILY WAY
City-St-Zip: TALLAHASSEE, FL 32311

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBBIE EDWARDS

VP

04/16/2008

Electronic Signature of Signing Officer or Director

Date