FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G39753

ANNA DE NOVIAS' BRIDALS, INC.

(0)

FILED
May 07 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address					1 1561111 5556 11116 18111 16551 51116 1111 41511	Gifti fifti dibil fifti fifti inn.
31 SOUTHEAS			31 SOUTHEAST 1ST AVE			
DOWNTOWN MIAMI FL 33131		DOWNTOWN MIAM	DOWNTOWN MIAMI FL 33131		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					05/16/1983	
_ ~	ace of Business	2a. Mailing Addres	is		4. FEI Number	Applied For
21	ame	26	Jam	<u> </u>	05-9228650	Not Applicable
Suite, Apt.	₱, 6 (C.	Suite, Apt. #, et	IC.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cur	rent Registered Agent		B1 Name	10. Name and Address of New Registe	red Agent
OBERȘTEIN, JAMES J.				81 Name		
	1 \$ W 129 AVENUE		82 Street Addre		ddress (P.O. Box Number is Not Acceptable)	-
MIAMI FL 33175			ŀ	83		
				64 City		FL 85 Zip Code
11. Pursuant t	o the provisions of Sections 607.0	0502 and 607.1508, Florida	Statutes, the ab	ove-named o	corporation submits this statement for the purpo	se 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 Statules.						
SIGNATURE but Den						
SIGNATURE	Signature: typed or point dinance of registerer			Agont signature r	required when reinstalling) DA	·
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
TITLE	PD ADSTRUCT	☐ DELE		1	,	T cusude T vocurion
NAME	OBERSTEIN, JAMES J.		12 NA	i		•
STREET ADDRESS	3821 SW 129 AVENUE MIAMI FL			HEET ADDRESS		
CITY-ST-ZIP TITLE	VO VO	DELE		Y-\$1-ZIP		Change Addition
NAME	OBERSTEIN, ANA		2.2 NA	1		
STREET ADDRESS	8101 CRESPI APT 2			REET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		4	IY-SI-ZIP		
TITLE	10	☐ DELF				Change Addition
NAME	OBERSTEIN, HILDA L		3.2 NA	ME		
STREET ADDRESS	38 21 SW 129 AVENUE		3.3 ST	REET ADDRESS		
CITY-ST-ZIP	MIAMI FL			IY-SI-ZIP		
TITLE		☐ DELF				Change Addition
NAME		_	4.2 N			
STREET ADORESS				REFT ADDRESS		
CITY-ST-ZIP		DELE		Y-ST-ZIP		Change Addition
TITLE			5.2 NA			La change La roundin
NAME CTOCCT ADDDCCC				REET ADDRESS		
STREET ADDRESS CITY-ST-ZIP				Y-ST-ZIP		
TITLE	<u> </u>	DELE			······································	☐ Change ☐ Addition
NAME	!	 . · · · · ·	6.2 NA			
STREET ADDRESS			6.3 ST	REFT ADDRESS		
CITY-ST-ZIP			6.4 CI ¹	Y-ST-ZIP		
14. I hereby o	ertify that the information supplies	d with this filing does not qu	ualify for the exe	mption states	d in Section 119.07(3)(i), Florida Statutes. I furth	er 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 eath; 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 changed, or on an attachment with an address						