

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

J 55095
Step n Style INC.

Principal Place of Business

Mailing Address

STEP N STYLE BRIDAL
321-B HAVENDALE BLVD.
AUBURNDALE, FL 33823
PH # 813-967-4670

321-B HAVENDALE BLVD.
AUBURNDALE, FL 33823
PH # 813-967-4670

3. Date Incorporated or Qualified

3a. Date of Last Report

May 1 95

4. F.I. Number

59-2777 972

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

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30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

85. Zip Code

86. City

FL

87. Zip Code

33823

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose 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 Statutes.

SIGNATURE: Frances Sue Ruskovich

Frances Sue Ruskovich

April 20 96

12. OFFICERS AND DIRECTORS

☐ DELETE

1. TITLE

NAME: Frances S. Ruskovich

STREET ADDRESS: 1820 Lakepoint Dr

CITY, ST, ZIP: Bartow

2. TITLE

NAME: Secretary

STREET ADDRESS: Sandra Herrington

CITY, ST, ZIP: 2227 Palmview Cir W.

Auburndale, FL 33823

3. TITLE

NAME:

STREET ADDRESS:

CITY, ST, ZIP:

4. TITLE

NAME:

STREET ADDRESS:

CITY, ST, ZIP:

5. TITLE

NAME:

STREET ADDRESS:

CITY, ST, ZIP:

6. TITLE

NAME:

STREET ADDRESS:

CITY, ST, ZIP:

7. TITLE

NAME:

STREET ADDRESS:

CITY, ST, ZIP:

13.

1. TITLE

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 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, or that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Frances Sue Ruskovich Frances Sue Ruskovich 4/30/96 841 9674670

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Print #

CR2E034 (12/95)