2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

Apr 07, 2008 8:00 am Secretary of State DOCUMENT # L07000109996 1. Entity Name 04-07-2008 90228 038 ***138.75 DISCOUNT ELEGANT BRIDAL, L.L.C. Principal Place of Business Mailing Address 4185 SW 148 TERRACE 4185 SW 148 TERRACE MIRAMAR FL 33027 MIRAMAR FL 33027 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/07) Applied For City & State City & State 4. FEI Number 36-46210 22 Not Applicable Zip Country Zip Couritry \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ALVARADO, CAROL M Street Address (P.O. Box Number is Not Acceptable) 4185 SW 148 TERRACE MIRAMAR FL 33027 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signatifies, typed or primed here of registered agent and title if applicable (NOTE: Registered Agent's gnature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 , i i After May 1, 2008, Fee Will Be \$538.75 - A 5 Make Check Payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. ☐ Change TITLE : **MGRM** ☐ Defete Titi F ■ Addition NAME NAME ALVARADO, CAROL M STREET ADDRESS STREET ADDRESS 4185 SW 148 TERRACE CITY-ST-ZIP MIRAMAR FL 33027 CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP ☐ Change THE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CITY-ST-Z:P Addition TITLE ☐ Defete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-ZIP 11. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath: that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Corr) Alvarado Fir Discount Elegant Briddi

SIGNATURE AND TYPED OR PRINTED RAME OF SIGN

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