

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Marjorie B. Matz, Governor
Secretary of State
Cynthia F. McLaughlin, Treasurer

**APPROVED
AND
FILED**

DOCUMENT # **L49905** (7)

1. Corporation Name
A STORY BOOK WEDDING INC.

95 MAY -1 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**6906 S W 87TH #12
13700 SW 74TH AVE
MIAMI FL 33176
US**

Mailing Address
**P O BOX 402543
13700 SW 74TH AVE
MIAMI BEACH FL 33140
US**

DO NOT WRITE IN THIS SPACE

2. Principal Executive Officer	2a. Mailing Address	3. Date Incorporated or Created	3a. Date of Last Report
21. State App # (if any)	26. State App # (if any)	02/04/1990	05/17/1994
22. City & State	27. City & State	4. FID Number	Applied For / Not Applicable
23. City & State	28. City & State	65-0084956	
24. City & State	29. City & State	5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing / Total Fund Contributions	<input type="checkbox"/> \$5.00 May Be Added to Fees
		7. This Corporation has liability for intangible tax under Chapter 207, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BERNSTEIN, IRWIN 5825 COLLINS AVE 5 A MIAMI BEACH FL 33140	81. Name
	82. Street Address, P.O. Box Number, if Not Applicable
	83. City & State
	84. City & State
	85. Zip Code
	FL

11. I, the undersigned, in the presence of two disinterested witnesses, the above named corporation, certify this statement for the purpose of changing its registered office or registered agent, as set forth in this statement, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, certified herein with regard to the application of Sections 607.01 and 607.02, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS																																																												
<table border="1"> <tr> <td>12.1. Name</td> <td>D</td> <td>13.1. Name</td> <td>BERNSTEIN, IRWIN</td> <td><input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.2. Street Address</td> <td>5825 COLLINS AVE 5A</td> <td>13.2. Street Address</td> <td>5825 COLLINS AVE #5-A</td> <td></td> </tr> <tr> <td>12.3. City & State</td> <td>MIAMI BEACH FL</td> <td>13.3. City & State</td> <td>MIAMI BEACH, FL 33140</td> <td></td> </tr> <tr> <td>12.4. Title</td> <td></td> <td>13.4. Title</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.5. Name</td> <td></td> <td>13.5. Name</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.6. Street Address</td> <td></td> <td>13.6. Street Address</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.7. City & State</td> <td></td> <td>13.7. City & State</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.8. Title</td> <td></td> <td>13.8. Title</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.9. Name</td> <td></td> <td>13.9. Name</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.10. Street Address</td> <td></td> <td>13.10. Street Address</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.11. City & State</td> <td></td> <td>13.11. City & State</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> <tr> <td>12.12. Title</td> <td></td> <td>13.12. Title</td> <td></td> <td><input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete</td> </tr> </table>	12.1. Name	D	13.1. Name	BERNSTEIN, IRWIN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.2. Street Address	5825 COLLINS AVE 5A	13.2. Street Address	5825 COLLINS AVE #5-A		12.3. City & State	MIAMI BEACH FL	13.3. City & State	MIAMI BEACH, FL 33140		12.4. Title		13.4. Title		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.5. Name		13.5. Name		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.6. Street Address		13.6. Street Address		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.7. City & State		13.7. City & State		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.8. Title		13.8. Title		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.9. Name		13.9. Name		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.10. Street Address		13.10. Street Address		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.11. City & State		13.11. City & State		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	12.12. Title		13.12. Title		<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Delete	
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14. I, the undersigned, certify that the information requested with this filing, voluntarily furnished and that I am fully liable for the accuracy of the information furnished herein. I hereby certify that the information furnished in this filing is true and correct, and that my signature shall have the same legal effect as if made under oath. That I am authorized to bind the corporation in the manner herein empowered by law to file this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 as required by said Chapter 607, Florida Statutes.

SIGNATURE: *Irwin Bernstein*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/95 (305) 253-4293