## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L49905

RT FILED
Jan 06, 2005
Secretary of State

Entity Name: A STORY BOOK WEDDING INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
360 SUN	SET DR			
200 IIAMI, FL	33173 US			
urrent N	lailing Address	s:	New Mailing Addres	s:
O BOX 4 IIAMI BEA	.02543 ACH, FL 33140	US		
El Number	: 65-0684657	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
325 COL	EIN, LINDA LINS AVE 5 A ACH, FL 33140	US		
	e named entity s e of Florida.	ubmits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
the State	e of Florida. RE:	ubmits this statement for the p		ed office or registered agent, or both,  Date
the State	e of Florida.  RE: Electroni			
the State	e of Florida.  RE: Electroni	c Signature of Registered Agr	ent	
the State	e of Florida.  RE: Electroni  mpaign Financing  S AND DIRECT	c Signature of Registered Ag Trust Fund Contribution ( ). TORS: Delete NDA AVE 5A	ent	Date
the State IGNATUI ection Car FFICER: tle: ame: ddress:	e of Florida.  RE: Electroni  mpaign Financing  S AND DIRECT  P ()  BERNSTEIN, LIN 5825 COLLINS A  MIAMI BEACH, F	c Signature of Registered Agr Trust Fund Contribution ( ).  CORS:  Delete NDA AVE 5A EL  Delete AVE #5A	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA BERNSTEIN P 01/06/2005