

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # M89608

1. Entity Name
INSPIRATIONAL ELEGANCE, INC.



Principal Place of Business
12788 INDIAN ROCKS RD.
LARGO, FL 33774

Mailing Address
12788 INDIAN ROCKS RD.
LARGO, FL 33774



02252004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2894906

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARRINGTON, BARBARA M.
12788 INDIAN ROCKS RD.
LARGO, FL 33774

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IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
D
ARRINGTON, BARBARA M.
STREET ADDRESS
12788 INDINA ROCKS RD.
CITY-ST-ZIP
LARGO, FL 33774

TITLE
NAME
D
GREEN, JULIA
STREET ADDRESS
12788 INDIAN ROCK RD.
CITY-ST-ZIP
LARGO, FL 33774

TITLE
NAME
D
PALM, MELANIE
STREET ADDRESS
12788 INDIAN ROCKS RD.
CITY-ST-ZIP
LARGO, FL 33774

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000093052
03/22/04-80002-019 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone *

3-15-04 727-595-4660