

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005049

FILED  
Jan 24, 2008  
Secretary of State

Entity Name: SIMPLY DIVINE CREATIONS, TOO, INC.

**Current Principal Place of Business:**

2207 JACKSON STREET, #202  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

2207 JACKSON STREET,  
202  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

PO BOX 222253  
HOLLYWOOD, FL 33022

**New Mailing Address:**

FEI Number: 65-1126214      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MEEKINS, MARY L REV  
12123 ROCKWELL WAY  
BOCA RATON, FL 33428      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MEEKINS, MARY L REV  
Address: 12123 ROCKWELL WAY  
City-St-Zip: BOCA RATON, FL 33428

Title: EX D      ( ) Delete  
Name: WILLIAMS, DEBORAH  
Address: 2532 NW 9 PLACE  
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D      ( ) Delete  
Name: KAYE, LOREN  
Address: 9080 LIME BAY BLVD  
City-St-Zip: TAMARAC, FL 33321

Title: D      ( ) Delete  
Name: SERVIDEO, ROSETTA CPA  
Address: 5500 NW 51 AVENUE  
City-St-Zip: COCONUT CREEK, FL 33073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: DAVID, DEGANI RABBI  
Address: 12123 ROCKWELL WAY  
City-St-Zip: BOCA RATON, FL 33428

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REVEREND MARY LOUISE MEEKINS

D

01/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date