

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000019645

Entity Name: DOWNTOWN DIVAS, INC.

FILED
Sep 02, 2005
Secretary of State

Current Principal Place of Business:

847 E NEW HAVEN
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

847 E NEW HAVEN
MELBOURNE, FL 32901 US

New Mailing Address:

FEI Number: 59-3627641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CECILIONE, CASEY
684 SHADY LANE
MELBOURNE, FL 32935 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CECILIONE, CASEY
Address: 8426 MIZELL DR.
City-St-Zip: VIERA, FL 32940

Title: S () Delete
Name: CECILIONE, CHRISTOPHER J
Address: 684 SHADY LANE
City-St-Zip: MELBOURNE, FL 32935

Title: VP () Delete
Name: CECILIONE, SUSAN C
Address: 1712 ARDMORE ST NE
City-St-Zip: PALM BAY, FL 32907

Title: ST () Delete
Name: CECILIONE, RONALD E
Address: 1712 ARDMORE ST NE
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: CASEY CECILIONE

D

09/02/2005

Electronic Signature of Signing Officer or Director

_____ Date