

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060584

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** LABELLA'S CREATIONS, INC.

**Current Principal Place of Business:**

969 US HIGHWAY 41 SOUTH  
INVERNESS, FL 34450

**New Principal Place of Business:**

**Current Mailing Address:**

969 US HIGHWAY 41 SOUTH  
INVERNESS, FL 34450

**New Mailing Address:**

**FEI Number:** 59-3656495      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134      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: PD  
Name: JOHNSON, SHELLY S  
Address: 969 US HIGHWAY 41 SOUTH  
City-St-Zip: INVERNESS, FL 34450

Title: VD  
Name: FALABELLA, COLLEEN L  
Address: 969 US HIGHWAY 41 SOUTH  
City-St-Zip: INVERNESS, FL 34450

Title: STD  
Name: JOHNSON, SHELLY S  
Address: 969 US HIGHWAY 41 SOUTH  
City-St-Zip: INVERNESS, FL 34450

I hereby 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 all other like empowered.

SIGNATURE: SHELLY S. JOHNSON

PD

03/12/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date