

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2002 8:00 am
Secretary of State

04-28-2002 90785 029 ***150.00

DOCUMENT # P01000081978

1. Entity Name

CHARMING EVENTS DECORATING SERVICES INC.

Principal Place of Business

**1740 SUNSET DRIVE,
WINTER PARK FL 32789**

Mailing Address

**1740 SUNSET DRIVE
WINTER PARK FL 32789**

2. Principal Place of Business

1837 Willow Lane

Suite, Apt. #, etc.

3. Mailing Address

1837 Willow Lane

Suite, Apt. #, etc.

City & State

Winter park, FL

Zip
32792

Country

USA

City & State

Winter park, FL

Zip

32792

Country

USA

4. FEI Number

59-3736957

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WALSH, EMILY A
1740 SUNSET DRIVE
WINTER PARK FL 32789**

7. Name and Address of New Registered Agent

Name **Emily A. Walsh Ribeiro**

Street Address (P.O. Box Number is Not Acceptable)

1837 Willow Lane

City

Winter park,

FL

Zip Code

32792

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **WALSH, EMILY A**
STREET ADDRESS **1740 SUNSET DRIVE**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE ~~President~~ ☐ Delete
NAME ~~Emily A. Walsh Ribeiro~~
STREET ADDRESS ~~1837 Willow Lane~~
CITY-ST-ZIP ~~Winter park, FL 32792~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition
NAME **Emily A. Walsh Ribeiro**
STREET ADDRESS **1837 Willow Lane**
CITY-ST-ZIP **Winter park, FL 32792**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 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

4-7-2

Date

Daytime Phone #

CR2E034 (9/01)