2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P01000112085 DOCUMENT

1. Entity Name

ELEGANT WEDDINGS & EVENTS. INC.



FILED
Mar 19, 2003 8:00 am
Secretary of State
03-19-2003 90100 038 ***150.00

				/		
Principal Place of Business 7507 KIMBERLY BLVD UNIT 130 N LAUDERDALE FL 33068		Mailing Address 7507 KIMBERLY BLVD UNIT 130 N LAUDERDALE FL 33068		E SERVICES IN ENGLISHED HONE ROUS ROUND HORSE	(218 ::6% 88181 J848: BIII: 1591	
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING	CHANGES	
City & State		City & State		4. FEI Number 01-0619802	Applied For Not Applicable	
Zip	Country	Zip	Country		\$8.75 Additional Fee Required	
	_6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered A	gent	
VIRTUE, Y	(VONNE		Name	Name .		
7507 KIM	BERLY BLVD UNIT 130	Street Address (P.O. Box Number is Not Acceptable)		
N LAUDERDALE FL 33068						
			City	FL	Zip Code	
8. The above the obligation	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office or regist	ered agent, or both, in the State of Florida. I am fa	amiliar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent signature requir	ed when reinstating) DATE		
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	f Chata		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	D	□ Delete	TITLE	ADDITIONATIONALIA TO OFFICE INS AND	Change Addition	
NAME STREET ADDRESS CITY-ST-ZIP	VIRTUE, YVONNE 7507 KIMBERLY BLVD UNIT 130 N LAUDERDALE FL 33068		NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME Street Address City-St-Zip -		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
		this filing does not qualify for		ection 119.07(3)(i), Florida Statutes. I further certif	fy 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 employment.

SIGNATURE