

FILED
Apr 21, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000015654 1. Entity Name ADRIANA'S ACCESSORIES, INC.	
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Principal Place of Business 30 NE 103RD ST MIAMI SHORES, FL 33138	Mailing Address 30 NE 103RD ST MIAMI SHORES, FL 33138
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DO NOT WRITE IN THIS SPACE



04182006 No Chg-P 0A2E034 (11/05)

4. FET Number 04-3600804	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1640 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing)	DATE _____
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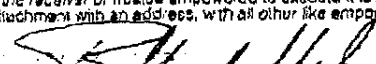
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	☐ Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fee.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HERDOCIA, ROBERTO J 30 NE 103RD ST MIAMI SHORES, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HERDOCIA, REBECCA 30 NE 103RD ST. MIAMI SHORES, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HERDOCIA, BEATRIZ 30 NE 103RD ST. MIAMI SHORES, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/03/06-80076-020 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 507, 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 empowered.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	4/18/06 Date	305 299 3150 Corporate Phone
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