2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021489

SINGLETON, FLORA

9313 OLD HASTINGS

HASTINGS, FL 32145 US

Name:

Address:

City-St-Zip:

FILED Apr 30, 2004 Secretary of State

Entity Name: J'S BRIDAL AND WEDDINGS RENTAL, INC **Current Principal Place of Business: New Principal Place of Business:** 312 N. MAIN STREET HASTINGS, FL 32145 **Current Mailing Address: New Mailing Address:** P.O.BOX 1291 HASTINGS, FL 32145 FEI Number: 03-0521277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BIVENS, JACQUELYN 1336 NE 32ND AVE GAINESVILLE, FL 32609 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HUGHES, BARBARA Name: Name: 4325 FLORENCE STREET Address: Address: City-St-Zip: HASTINGS, FL 32145 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BIVENS, JACQUELYN Name: 1336 NE 32 AVE. Address: Address: GAINESVILLE, FL 32609 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SINGLETON, BETTY Name: Name: 9313 OLD HASTINGS RD. Address: Address: City-St-Zip: HASTINGS, FL 32145 US City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: BARBARA HUGHES 04/30/2004