2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

May 04, 2005 8:00 am Secretary of State DOCUMENT # P02000031837 1. Entity Name 05-04-2005 90149 047 ***150.00 BERNARDA MORALES FASHIONS, INC. Principal Place of Business Mailing Address 8308 NW 7TH ST 8308 NW 7TH ST APT #43 MIAMI FL 33126 APT #43 MIAMI FL 33126 2. Principal Place of Business 308 り・め Mailing Address かい、WU 80を8 Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) 43 City & State (Applied For City & State 4. FEI Number 75-3031832 Not Applicable Countr Country \$8.75 Additional USA 5. Certificate of Status Desired 331Z6 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ZAPATA, EDDY Street Address (P.O. Box Number is Not Acceptable) 8308 NW 7TH APT #43 **MIAMI FL 33126** 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DΡ TITLE ☐ Delete TITLE ☐ Change ☐ Addition MORALES, BERNARDA NAME NAME 8308 NW 7TH ST APT 43 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33126 CITY-ST-ZIP DV Delete TITLE TITLE Change ☐ Addition ZAPATA, EDDY NAME NAME STREET ADDRESS 8308 NW 7TH ST APT 43 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33126 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED