


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 06, 2004 8:00 am**  
**Secretary of State**

05-06-2004 90160 010 \*\*\*150.00

<b>DOCUMENT # P02000063312</b> 1. Entity Name <b>SPA BELLISSIMA, INC.</b>					
Principal Place of Business <b>2100-A PROCTOR RD SARASOTA, FL 34231</b>			Mailing Address <b>208 ISLAND AVE SARASOTA, FL 34242</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>J.S.I. ENTERPRISES</b> <b>J. BRIEN JOHNSON</b> <i>J. BRIAN JOHNSON</i> <b>1008 MYRTLE AVE</b> <b>VENICE, FL 34285</b>				Name  Street Address (P.O. Box Number is Not Acceptable)  City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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:  DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>JOSEPH, IKBAL E</b> <b>208 ISLAND AVENUE</b> <b>SARASOTA, FL 34242</b>		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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.					
<b>SIGNATURE:</b>  <b>3/1/04 (941) 924-1302</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

ATTACHMENT

54052691



## Division of Corporations

## 2004 Annual Report

Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	P02000063312
Business Entity Name	SPA BELLISSIMA, INC.
Original File Date	06/07/2002

FEI Number 01-0724638  
Principal Address 2100-A PROCTOR RD  
SARASOTA, FL 34231  
Mailing Address 208 ISLAND AVE  
SARASOTA, FL 34242  
Registered Agent J.S.I. ENTERPRISES  
J. BRIEN JOHNSON  
1008 MYRTLE AVE  
VENICE, FL 34285 US

## Officer/Director Name And Address

D  
IKBAL E JOSEPH  
208 ISLAND AVENUE  
SARASOTA, FL 34242

If all of the above information is correct and you do not wish to make any changes, please select:

If you need to make changes to the above information, please select:

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