

## **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000098422

**FILED**  
**Jun 30, 2009**  
**Secretary of State**

**Entity Name:** FABULOUS WEDDINGS & AFFAIRS, INC.

**Current Principal Place of Business:**

8741 NW 189TH TERRACE  
MIAMI, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

8741 NW 189TH TERRACE  
MIAMI, FL 33018

**New Mailing Address:**

**FEI Number:** 20-8943006

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FLUHART, CYNTHIA  
8741 NW 189TH TERR  
MIAMI, FL 33018 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FLUHART, CYNTHIA  
Address: 8741 NW 189TH TERR  
City-St-Zip: MIAMI, FL 33018

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: DIAZ, RICHARD M  
Address: 8741 NW 189TH TERR  
City-St-Zip: MIAMI, FL 33018

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: CYNTHIA FLUHART

PD

06/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date