

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017440

Entity Name: MYBRIDALCONNECTION, INC.

FILED
Apr 27, 2004
Secretary of State

Current Principal Place of Business:

5889 AIRPORT ROAD
SUITE 1429
PORT ORANGE, FL 32128

Current Mailing Address:

5889 AIRPORT ROAD
SUITE 1429
PORT ORANGE, FL 32128

New Principal Place of Business:

5889 SOUTH WILLIAMSON BLVD
SUITE 1429
PORT ORANGE, FL 32128

New Mailing Address:

5889 SOUTH WILLIAMSON BLVD.
SUITE 1429
PORT ORANGE, FL 32128

FEI Number: 11-3683629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SESSIONS, JERRY L II
50 NORTH LAURA STREET
SUITE 2900
JACKSONVILLE, FL 32202

Name and Address of New Registered Agent:

SESSIONS, GREGORY A
5889 SOUTH WILLIAMSON BLVD
SUITE 1429
PORT ORANGE, FL 32128

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: GREGORY A. SESSIONS

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SESSIONS, GREGORY A
Address: 5889 AIRPORT ROAD SUITE 1429
City-St-Zip: PORT ORANGE, FL 32128

Title: D () Delete
Name: FERNANDEZ, EVELIO JR
Address: 9719 SAN JOSE BOULEVARD NO. 3
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SESSIONS, GREGORY A
Address: 5889 SOUTH WILLIAMSON BLVD, SUITE 1429
City-St-Zip: PORT ORANGE, FL 32128

Title: VP (X) Change () Addition
Name: GABRIELE, SESSIONS F
Address: 5889 SOUTH WILLIAMSON BLVD, SUITE 1429
City-St-Zip: PORT ORANGE, FL 32128

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.

SIGNATURE: GABRIELE F. SESSIONS

VP

04/27/2004

Electronic Signature of Signing Officer or Director

Date