

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2004 8:00 am
Secretary of State

07-15-2004 90003 031 ***158.75

DOCUMENT # P03000040532

1. Entity Name
MARYLEN EXPOSITO WEDDINGS, INC.



Principal Place of Business
**15766 SW 75TH TERRACE
MIAMI, FL 33193**

Mailing Address
**15766 SW 75TH TERRACE
MIAMI, FL 33193**

54062420



2. Principal Place of Business
329 W. 12street

3. Mailing Address
PO Box 52-4573

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07012004

Chg-P

CR2E034 (10/03)

City & State
Hialeah, FL

City & State
miami, FL

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip
33010

Country
USA

Zip
33152

Country
USA

5. Certificate of Status Desired

☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**EXPOSITO, MARYLEN
15766 SW 75TH TERRACE
MIAMI, FL 33193**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
EXPOSITO, MARYLEN
15766 SW 75TH TERRACE
MIAMI, FL 33193**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**-329 W. 12street
Hialeah, FL 33193**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ 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.

SIGNATURE

7-1-04 305-505-6642