2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 21, 2005 08:00 AM DOCUMENT # P03000062687 Secretary of State 1. Entity Name HEAVEN'S TREASURES BY REGALIA, INC. Principal Place of Business Mailing Address 9100 S DADELAND BLVD 9100 S DADELAND BLVD STE 103 MIAMI FL 33156 MIAMI FL 33156 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Stilte, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 20-0045180 Not Applicable Zip Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NELSON, BARRY A ESQ. Street Address (P.O. Box Number is Not Acceptable) 2775 SUNNY ISLES BOULEVARD SUITE 118 NORTH MIAMI BEACH FL 33160 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 | 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 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THILE D Detete TITLE Change | ☐ Addition JUBIS, MAGDA S NAME STREET ADDRESS 5000 SW 75TH AVENUE #204 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33155 CITY-ST-ZIP 02/21/05-80034-015 Change. of Addition TITLE D Delete TITLE JUBIS, OSCAR NAME NAME STREET ADDRESS 5000 SW 75TH AVENUE #204 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33155 CITY+SI-7IP HITE Delete FULLE ☐ Change Addition DOBSON, LISETTE J MAME NAME STREET ADDRESS 5000 SW 75TH AVENUE #204 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33155 TITLE TITLE ☐ Defete ☐ Change Addition DOBSON, ELI H NAME 5000 SW 75TH AVENUE #204 STREET ADDRESS STREET ADDRESS MIAMI FL 33155 CITY - ST-7(P CITY-ST-7IP TITLE MILE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CHY-ST-ZIP ☐ Delele THEF ☐ Change ☐ 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)(1), 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 arrivaddress, with all other like empowered.

FILED