

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2007 8:00 am
Secretary of State

06-15-2007 90022 050 ***150.00

DOCUMENT # P03000103005

1. Entity Name
HEAVENLY SUCCESS, INC.



Principal Place of Business
**1541 INTERNATIONAL PKWY
LAKE MARY, FL 32746**

Mailing Address
**1541 INTERNATIONAL PKWY
LAKE MARY, FL 32746**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Ste. 1021

Suite, Apt. #, etc.

Ste. 1021

City & State

City & State

Zip

Country

Zip

Country

05252007

Chg-P

CR2E034 (12/06)

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**Giovanni
COLOVANNI & ITZEL BRUNO
1541 INTERNATIONAL PKWY
SUITE 1021
LAKE MARY, FL 32746**

7. Name and Address of New Registered Agent

Name

Giovanni & Itzel Bruno

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)

5.31.07

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

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 ☐ Delete
NAME **P**
STREET ADDRESS **OLLER-BRUNO, ITZEL**
CITY-ST-ZIP **6103 TWINWOOD TR
SANFORD, FL 32771**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **BRUNO, GIOVANNI J**
CITY-ST-ZIP **6103 TWINWOOD TR
SANFORD, FL 32771**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Giovanni & Itzel Bruno

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5.31.07

Date

407.333.3536

Daytime Phone #