2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 05, 2007 8:00 am Secretary of State

DOCUMENT # P0400017879 1. Entity Name EUROPEAN ELEGANCE, INC.						02-05-2007	90083 0	43 ***15	0.00
Notice Address				1					
Principal Place of Business 2423 SOUTH HIAWASSEE ROAD METRO WEST SHOPPING CENTRE ORLANDO, FL 32835 US		Mailing Address 2423 SOUTH HIAWASSEE ROAD METRO WEST SHOPPING CENTRE ORLANDO, FL 32835 US				IA do adi adii alo	14 (18 4) (18 1) (1 1)	11 51 1 II 128 1	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		<u> </u>					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01192007	Chg-P	CR2E0	34 (12/06)		
City & State		City & State		4. FEI Numbe 16-1691			 	plied For at Applicable	
Zıp	Country	Zip Coun		ntry		of Status Desired		8.75 Add ee Require	
<u> </u>	6. Name and Address of Current	t Registered Agent		Name	7. Name and	Address of New R	registered A	gent	
 BOWLES, KAREN			Name						
802 LITTLE HAMPTON LANE GOTHA, FL 34734			Street Address	(P.O. Box Numbe	r is Not Acceptable	e)			
				City			FL	Zip Code	e
	e named entity submits this statement f	or the purpose of changing its	register	ed office or registe	ered agent, or bott	n, in the State of Flo	orida. I am t	amiliar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered agen	Land title if applicable (NOTE	Registere	ad Agent signature require	ki when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.	9. Election Campaig			0.00 May Be ded to Fees				
10.	, OFFICERS AND	DIRECTORS	11.		ADDITIONS/0	CHANGES TO OFF	ICERS AND	DIRECTORS	3 IN 11
TITLE	P A	☐ Delete	TITL	E				Change	☐ Addition
NAME	BOWLES KAREN		NAM	16					
STREET ADDRESS CITY-ST-ZIP	2423 SOUTH HIAWASSEE ROA ORLANDO, FL 32835	∤ D		FET ADDRESS '-ST-ZIP					
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12. I hereby certify that the information supplied with this filling 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:

IATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

1-30-07

321-297-469