# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000057368

**Entity Name:** PURE BLISS SPA, INC.

**Current Principal Place of Business:**

6807 S.W. 40TH ST.
MIAMI, FL 33155

**New Principal Place of Business:**

3374 CORAL WAY
MIAMI, FL 33145

**Current Mailing Address:**

6807 S.W. 40TH ST.
MIAMI, FL 33155

**New Mailing Address:**

3374 CORAL WAY
MIAMI, FL 33145

FEI Number: 56-2450192    FEI Number Applied For ( )    FEI Number Not Applicable ( )    Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALBURY, LUCY
15249 S.W. 36TH TERRACE
MIAMI, FL 33185    US

**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent                                        Date

**Election Campaign Financing Trust Fund Contribution ( ).**

## OFFICERS AND DIRECTORS:

Title:       PD           ( ) Delete
Name:      FRAGA, ANNETTE
Address:   2324 S.W. 58TH AVE.
City-St-Zip: MIAMI, FL 33155

Title:       VD           (X) Delete
Name:      ALBURY, LUCY
Address:   15249 SW 36 TERRACE
City-St-Zip: MIAMI, FL 33185

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:       PD           (X) Change ( ) Addition
Name:      ALBURY, LUCY
Address:   15249 SW 36 TERRACE
City-St-Zip: MIAMI, FL 33185

Title:                    ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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:  LUCY ALBURY                               PD                03/02/2005

Electronic Signature of Signing Officer or Director                              Date