2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000018547

City-St-Zip:

FILED Oct 29, 2007 Secretary of State

Entity Name: INSTYLE ENTERPRISES, INC.		
Current Principal Place of Business:	New Principal Place o	f Business:
6361 BRAVA WAY BOCA RATON, FL 33433		
rrent Mailing Address: New Mailing Address:		:
6361 BRAVA WAY BOCA RATON, FL 33433		
FEI Number: 16-1716078 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:	
FEZZA, LAURA 6361 BRAVA WAY BOCA RATON, FL 33433 US		
The above named entity submits this statement for the pur in the State of Florida.	pose of changing its registered	office or registered agent, or both,
SIGNATURE:		
Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS
Title: D () Delete Name: FEZZA, LAURA Address: 6361 BRAVA WAY CitysSt-Zip: BOCA RATON FL 33433	Title: D/P (Name: FEZZA, LAUF Address: 6361 BRAVA	WAY

City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: BOCA RATON, FL 33433 () Delete Title: () Change (X) Addition FEZZA-SPADAVECCHIA, KRISTINA VP Name: Name: Address: Address: 21934 PALM GRASS DRIVE BOCA RATON, FL 33428 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition SECY Name: Name: FEZZA, JESSICA SECY Address: Address: 6361 BRAVA WAY City-St-Zip: City-St-Zip: BOCA RATON, FL 33433 Title: () Delete Title: () Change (X) Addition FEZZA, LAURÉN TREAS Name: Name: Address: Address: 6361 BRAVA WAY

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

City-St-Zip:

BOCA RATON, FL 33433

SIGNATURE: LAURA FEZZA PRES 10/29/2007