

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000035626

FILED
Apr 26, 2006
Secretary of State

Entity Name: YOUR DAY BRIDAL & SPA, INC.

Current Principal Place of Business:

2701 SW COLLEGE ROAD
303
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3097
BELLEVIEW, FL 34421 US

New Mailing Address:

2701 SW COLLEGE ROAD
303
OCALA, FL 34474 US

FEI Number: 42-1661809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE OFFICES OF GAGNON & GAGNON
13550 SE 33RD COURT
SUMMERFIELD, FL 34491 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: P () Delete
Name: GAGNON, DAVID J PH.D.
Address: PO BOX 3097
City-St-Zip: BELLEVIEW, FL 34421 US

Title: VP () Delete
Name: TAUBE, SHANNON R
Address: PO BOX 3097
City-St-Zip: BELLEVIEW, FL 34421 US

Title: TRES () Delete
Name: GAGNON, DAVID J PH.D.
Address: PO BOX 3097
City-St-Zip: BELLEVIEW, FL 34421

Title: SEC () Delete
Name: TAUBE, SHANNON R
Address: PO BOX 3097
City-St-Zip: BELLEVIEW, FL 34421 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: GAGNON, SHANNON R
Address: PO BOX 3097
City-St-Zip: BELLEVIEW, FL 34421 US

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

Title: SEC (X) Change () Addition
Name: GAGNON, SHANNON R
Address: PO BOX 3097
City-St-Zip: BELLEVIEW, FL 34421 US

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

SIGNATURE: DAVID GAGNON

PRES

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date