

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000029659

Entity Name: MY DRESS CO.

FILED  
Feb 13, 2007  
Secretary of State

## Current Principal Place of Business:

4320 SUNBEAM ROAD  
123  
JACKSONVILLE, FL 32257

## New Principal Place of Business:

2020 BURPEE DRIVE  
JACKSONVILLE, FL 32210

## Current Mailing Address:

PO BOX 23393  
JACKSONVILLE, FL 32241

## New Mailing Address:

2020 BURPEE DRIVE  
JACKSONVILLE, FL 32210

FEI Number: 74-3166003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AKIL, KIBIBI  
4320 SUNBEAM ROAD  
123  
JACKSONVILLE, FL 32257 US

## Name and Address of New Registered Agent:

AKIL, KIBIBI  
2020 BURPEE DRIVE  
JACKSONVILLE, FL 32210 US

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:

02/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: AKIL, KIBIBI  
Address: 4320 SUNBEAM ROAD APT. 123  
City-St-Zip: JACKSONVILLE, FL 32257

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: AKIL, KIBIBI  
Address: 2020 BURPEE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210

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: KIBIBI AKIL

PSTD

02/13/2007

Electronic Signature of Signing Officer or Director

Date