

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000083864

Entity Name: VIVID STYLE, INC.

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1467 MAIN STREET  
SARASOTA, FL 34236

**New Principal Place of Business:**

620 DUVAL ST  
KEY WEST, FL 33040

**Current Mailing Address:**

PO BOX 17675  
SARASOTA, FL 34276

**New Mailing Address:**

FEI Number: 20-5083766

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHREN, PAUL J  
1467 MAIN STREET  
SARASOTA, FL 34236 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CHREN, PAUL J  
Address: PO BOX 17675  
City-St-Zip: SARASOTA, FL 34276

Title: D  
Name: CHREN, ELIZABETH B  
Address: PO BOX 17675  
City-St-Zip: SARASOTA, FL 34276

I hereby 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 all other like empowered.

SIGNATURE: PAUL CHREN

D

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date