

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000116458

FILED  
May 01, 2007  
Secretary of State

Entity Name: HEAVENLY EXPRESSIONS, INC.

## Current Principal Place of Business:

2978 SW 172 LANE RD.  
OCALA, FL 34473 US

## New Principal Place of Business:

2878 SW 172 LANE RD.  
OCALA, FL 34473 US

## Current Mailing Address:

2978 SW 172 LANE RD.  
OCALA, FL 34473 US

## New Mailing Address:

3101 SW 34TH AVE # 905  
268  
OCALA, FL 34473 US

FEI Number: 20-5573174

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALVARADO, MAYRA  
5690 NW 74TH PL., #102  
COCONUT CREEK, FL 33073 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: ALVARADO, MAYRA  
Address: 2878 SW 172 LANE RD.  
City-St-Zip: OCALA, FL 34473 US

Title: VP/D ( ) Delete  
Name: ZELAYA, OSCAR  
Address: 2878 SW 172 LANE RD.  
City-St-Zip: OCALA, FL 34473 US

Title: T/D ( ) Delete  
Name: ZELAYA, WALTER  
Address: 2878 SW 172 LANE RD.  
City-St-Zip: OCALA, FL 34473 US

Title: S ( ) Delete  
Name: ALEMAN, LUCIA  
Address: 2878 SW 172 LANE RD.  
City-St-Zip: OCALA, FL 34473 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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.

SIGNATURE: MAYRA ALVARADO

P/D

05/01/2007

Electronic Signature of Signing Officer or Director

Date