

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000000003

Entity Name: BELLA FESTA DESIGN, INC.

FILED
Sep 15, 2008
Secretary of State

Current Principal Place of Business:

1115 COLUMBUS BLVD.
CORAL GABLES, FL 33134 US

New Principal Place of Business:

3129 SW 67 AVE
MIAMI, FL 33155 US

Current Mailing Address:

1115 COLUMBUS BLVD.
CORAL GABLES, FL 33134 US

New Mailing Address:

3129 SW 67 AVE
MIAMI, FL 33155 US

FEI Number: 20-8134142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GABRIELA ATIENZA
1115 COLUMBUS BLVD
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GABRIELA ATIENZA
3129 SW 67 AVE
MIAMI, FL 33155 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: GABRIELA ATIENZA

09/15/2008

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: PRES () Delete
Name: ATIENZA, GABRIELA
Address: 1115 COLUMBUS BLVD.
City-St-Zip: CORAL GABLES, FL 33134 US

Title: TRES (X) Delete
Name: ATIENZA, GABRIELA
Address: 1115 COLUMBUS BLVD.
City-St-Zip: CORAL GABLES, FL 33134 US

Title: SECT (X) Delete
Name: ATIENZA, GABRIELA
Address: 1115 COLUMBUS BLVD.
City-St-Zip: CORAL GABLES, FL 33134 US

Title: DIR (X) Delete
Name: ATIENZA, GABRIELA
Address: 1115 COLUMBUS BLVD.
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: ATIENZA, GABRIELA
Address: 3129 SW 57 AVE
City-St-Zip: MIAMI, FL 33155 US

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: GABRIELA ATIENZA

PRES

09/15/2008

Electronic Signature of Signing Officer or Director

Date