2008 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 18, 2008 08:00 All Secretary of State DOCUMENT # P07000015088 1. Entity Name DIVINE BLISS, INC. Principal Place of Business Mailing Address 1410 FLETCHER ST 1410 FLETCHER ST HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 04162008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 61-1521314 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FILINGS, INC. DO NOT WRITE 3732 N.W. 16TH STREET FT. LAUDERDALE, FL 33311-4132 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE MORDECAI, JAMIE NAME STREET ADDRESS 1410 FLETCHER ST CITY-ST-ZIP HOLLYWOOD, FL 33020 D NAME LORUSSO, DOREEN STREET ADDRESS 1410 FLETCHER ST CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like impowered.

SIGNATURE:

STREET ADDRESS

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/08

Daytime Phone #