## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000022750

WILMETTE, IL 60091

City-St-Zip:

Entity Name: PERFECT BROW FLORIDA INC.

FILED Apr 20, 2008 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
5821 LEGACY CRESCENT PL. #103					
	W, FL 33569				
Current M	ailing Addres	s:	New Mailing Address:	New Mailing Address:	
5821 LEGACY CRESCENT PL.			3223 LAKE AV.		
#103 RIVERVIE	W, FL 33569		15C WILMETTE, IL 60091	US	
FEI Number:	20-8475602	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
PORIKOS-GORGEES, ELIZABETH 5821 LEGACY CRESCENT PL. #103 RIVERVIEW, FL 33569 US					
	named entity s of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	` '		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	VP () GORGEES, SAL 3223 LAKE AV.		Title: ( Name: Address:	) Change ()Addition	

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: ELIZABETH PORIKOS-GORGEES P 04/20/2008