


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90011 030 ***158.75

DOCUMENT # P07000078606	
1. Entity Name PARK AVENUE BRIDAL - MANDARIN, INC.	

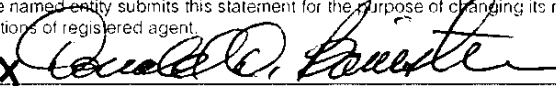
Principal Place of Business 9965 SAN JOSE BLVD JACKSONVILLE, FL 32257	Mailing Address 1748 ROYAL FERN LANE ORANGE PARK, FL 32063
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip	3. Mailing Address c/o David A. King, Attorney Suite, Apt. #, etc. 1416 Kingsley Avenue City & State Orange Park, FL Zip 32073 Country USA
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01082008	Chg-P CR2E034 (12/06)
4. FEI Number 26-0496287	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BANISTER, DONALD D 1748 ROYAL FERN LANE ORANGE PARK, FL 32063	
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7. Name and Address of New Registered Agent Name Banister, Donald D. Street Address (P.O. Box Number is Not Acceptable) 1600-5 Park Avenue City Orange Park, FL Zip Code 32073	
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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 <input checked="" type="checkbox"/> (NOTE: Registered Agent's signature required when re-registering)		DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
NAME D BANISTER, JACQUELINE R	<input type="checkbox"/> Delete
STREET ADDRESS 1748 ROYAL FERN LANE ORANGE PARK, FL 32063	
CITY ST ZIP	
NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY ST ZIP	
NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY ST ZIP	
NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY ST ZIP	
NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY ST ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1600-5 Park Avenue Orange Park, FL 32073	
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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 empowered.	
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SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	1/17/08 DATE	(904) 278-5858 CONTACT NUMBER
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