

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093067

Entity Name: BEADS ON THE AVE, INC.

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

111 NE 12TH STREET
DELRAY BEACH, FL 33444

New Principal Place of Business:

151 NE 2ND AVE
DELRAY BEACH, FL 33444

Current Mailing Address:

111 NE 12TH STREET
DELRAY BEACH, FL 33444

New Mailing Address:

151 NE 2ND AVE
DELRAY BEACH, FL 33444

FEI Number: 26-0757965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, TONIA
111 NE 12TH STREET
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

TURNER, TONIA
151 NE 2ND AVE
DELRAY BEACH, FL 33444 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: TONIA TURNER

06/23/2009

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: COWN () Delete
Name: TURNER, TONIA
Address: 149 NE 2 AVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: COWN () Delete
Name: LOVE, KRISTI
Address: 149 NE 2 AVE
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COWN (X) Change () Addition
Name: TURNER, TONIA
Address: 151 NE 2 AVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: COWN (X) Change () Addition
Name: LOVE, KRISTI
Address: 151 NE 2 AVE
City-St-Zip: DELRAY BEACH, FL 33444

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: TONIA TURNER

COWN

06/23/2009

Electronic Signature of Signing Officer or Director

Date