## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Secretary of State **DOCUMENT # P07000093974** 05-05-2008 90245 033 \*\*\*150.00 1. Entity Name FANCYELLA, INC. Principal Place of Business Mailing Address 4662 NW 107 AVENUE #1902 66014382 4662 NW 107 AVENUE #1902 MIAMI, FL 33178 MIAMI, FL 33178 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 13011 NW 8 Street 13011 NW 8 Street Suite, Apt. #, etc. Suite, Apt. #, etc. 02292008 CR2E034 (12/06) Chg-P 4. FEI Number Applied For City & State City & State 33182 Miani Not Applicable Miani Country: 33182 Country \$8.75 Additional 7in 5. Certificate of Status Desired <u>υς Α</u> 33182 Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 City Zip Code Fl 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 Signature, typed or printed name of repleased agent and title if applicable. (NOTE: Registered Agent signeture required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE TITLE PSD ☐ Change ☐ Delete WENDY ZAMORA ZAMORA, WENDY NAME NAME 13011 NW & STREET STREET ADDRESS 4662 NW 107 AVENUE #1902 STREET ADDRESS MIAMI, FL 33182 MIAMI, FL 33178 C11Y-ST-ZIP CITY-ST-7P VPD HILE Delete T/TE F ☐ Change ☐! Addition CONSUEGRA-VELEZ, SILVIA NAME NUME SILVIA CONSUELEA-VELEZ 4662 NW 107 AVENUE #1902 STREET ADDRESS STREET ADDRESS 17011 NW 8 STEBET CITY-ST-ZIP MIAMI, FL 33178 CITY-ST-7P MIAMI, FL 33182 ☐ Delete TITLE ☐ Change. --- ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78P ☐ Change ☐ Addition ☐ Delete TITLE NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZP TITLE ☐ Octate TIME ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP 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 cath; 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. 786-250-6013 WENDY ZAMDEA PRESIDENT SIGNATURE:

FILED Jun 18, 2008 8:00 am