

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000110302

FILED
Oct 22, 2008
Secretary of State**Entity Name:** LOLLIPOP AND LADYBUGS PARTY CREATIONS, INC**Current Principal Place of Business:**8761 SW 220 ST
CUTLER BAY, FL 33190 US**New Principal Place of Business:**8875 SW 208 ST
CUTLER BAY, FL 33189 US**Current Mailing Address:**8761 SW 220 ST
CUTLER BAY, FL 33190 US**New Mailing Address:**8875 SW 208 ST
CUTLER BAY, FL 33189 US**FEI Number:** 26-1279589**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MARQUEZ, JACQUELIN MRS
8761 SW 220 ST
MIAMI, FL 33190 US**Name and Address of New Registered Agent:**MARQUEZ, JACQUELIN MRS
8875 SW 208 ST
MIAMI, FL 33189 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: JACQUELINE MARQUEZ

10/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: RAMOS, ROSA MRS
Address: 21269 SW 85 AVE APT 102
City-St-Zip: MIAMI, FL 33189 US**Title:** VP () Delete
Name: MARQUEZ, JACQUELIN MRS
Address: 8761 SW 220 ST
City-St-Zip: MIAMI, FL 33190 US**Title:** VP (X) Delete
Name: HERRERA, LERIDA MRS
Address: 21269 SW 85 AVE
City-St-Zip: MIAMI, FL 33189 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP (X) Change () Addition
Name: MARQUEZ, JACQUELIN MRS
Address: 8875 SW 208 ST
City-St-Zip: MIAMI, FL 33189 US**Title:** () Change () Addition
Name:
Address:
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: JACQUELINE MARQUEZ

VP

10/22/2008

Electronic Signature of Signing Officer or Director

Date