

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041984

Entity Name: ELLA'S FAIRY TALE, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

1800 S. OCEAN DR.  
2301  
HALLANDALE BEACH, FL 33009 US

## New Principal Place of Business:

## Current Mailing Address:

1800 S. OCEAN DR.  
2301  
HALLANDALE BEACH, FL 33009 US

## New Mailing Address:

3536 CAMBRIDGE AVE.  
APT. 4E  
RIVERDALE, NY 10463 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, MARCIA A  
1800 S. OCEAN DR.  
2301  
HALLANDALE BEACH, FL 33009 US

## Name and Address of New Registered Agent:

WILSON, MARCIA A  
1800 S OCEAN DR.  
2301  
HALLANDALE BEACH, FL 33009 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILSON, MARCIA A  
Address: 1800 S. OCEAN DR. #2301  
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: VP ( ) Delete  
Name: WILSON, ELLA S  
Address: 1800 S. OCEAN DR. #2301  
City-St-Zip: HALLANDALE BEACH, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARCIA WILSON

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date