

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000106131

Entity Name: DAZZLES OF BOCA, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

5163 NW 51 AVENUE
COCONUT CREEK, FL 33073

New Principal Place of Business:

2200 GLADES RD
STE404
BOCA RATON, FL 33431

Current Mailing Address:

5163 NW 51ST AVENUE
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 94-3460364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, HORATIO
5163 NW 51ST AVENUE
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STERLING, LUCY
Address: 5163 NW 51ST AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP () Delete
Name: WALKER, HORATIO
Address: 5163 NW 51ST AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

Title: S () Delete
Name: WALKER, HORATIO
Address: 5163 NW 51ST AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

Title: T () Delete
Name: WALKER, HORATIO
Address: 5163 NW 51ST AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: LUCY STERLING

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date