FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY 19 AM 10: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000005260 (4)

1. Corporation Name
EVERY BUSINESS SERVICE, INC.

Principal Place of Business:
1 FLORIDA PARK DR
STE 110
PALM COAST FL 32137
US

Mailing Address:
P.O. BOX 730035
ORMOND BEACH FL 32173-0035
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/17/1992
3a. Date of Last Report: 04/01/1994
4. FEI Number: 59-3153348 — Applied For / Not Applicable
5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes: X Yes [ ] No

2. Principal Place of Business: 21 ___ Suite, Apt # etc. 22 ___ City & State 23 ___ Zip 24 ___ County 25 ___
2a. Mailing Address: 26 ___ Suite, Apt # etc. 27 ___ City & State 28 ___ Zip 29 ___ County 30 ___

9. Name and Address of Current Registered Agent
BERNS, MURRAY
52 WINDING CREEK WAY
ORMOND BEACH FL 32174

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

SIGNATURE: [signature], Pres. 4/01/95

12. OFFICERS AND DIRECTORS

TITLE: D
NAME: BERNS, MURRAY
STREET ADDRESS: 52 WINDING CREEK WAY
CITY-ST-ZIP: ORMOND BEACH FL 32174

TITLE: ~~D~~
NAME: ~~WOLFGANG, BARBARA~~
STREET ADDRESS: ~~52 WINDING CREEK WAY~~
CITY-ST-ZIP: ~~ORMOND BEACH FL 32174~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

X Change [ ] Addition
TITLE: D
NAME: HERMAN, SR., N. JAMES
STREET ADDRESS: 128 W. GRANADA BLVD.
CITY-ST-ZIP: ORMOND BEACH, FL. 32174

14. I do hereby certify that the information supplied with this filing is complete, true and correct and that I am duly authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE: [signature] Murray Berns 3/15/95 904-446-4455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — TELEPHONE

0404235 FP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

DOCUMENT # P92000005858 (5)

1. Corporation Name

THE PERFECT WEDDING, INC.

Principal Place of Business

12 N THORNTON AVE
ORLANDO FL 32801

Mailing Address

1111 DEER RUN
WINTER SPRGS FL 32708
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/16/1992
3a. Date of Last Report: 06/23/1994

2. Principal Place of Business
2a. Mailing Address

4. FEI Number: 59-3149860 ☐ Applied For ☐ Not Applicable

Suite, Apt. # etc.

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

City & State

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

Zip / Country

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HIPP, CYNTHIA G
1111 DEER RUN
WINTER SPRINGS FL 32708

10. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

11. Pursuant to the provisions of Sections 607.1508 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	LOSSIN, LAURIE B
STREET ADDRESS	12 NO THORNTON AVE
CITY-ST-ZIP	ORLANDO FL
TITLE	VT
NAME	HIPP, CYNTHIA G
STREET ADDRESS	1111 DEER RUN
CITY-ST-ZIP	WINTER SPRING FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14. I hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section 119.07 Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Cynthia G. Hipp (signature) Cynthia G. Hipp 5/11/95 (407) 696-4766

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0413497 FP