FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

ţ.		MENT # P93000 Bridals, INC.	0041970 (3)						
Principal Place of Business Mailing Address							-{ 1,400,1001,410,40,108,41,11,40,40,41,40,41,40,41,40,41,40,41,40,41,40,41,40,41,40,41,40,41,40,40,40,40,40,40,40,40,40,40,40,40,40,			1801 BON 1001
2317 NW FEDERAL HWY. STUART FL 34994			2317 NW FEDERAL HV STUART FL 34994	VY.						
US			US			DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified 06/14/1993			
_	Principal P	f Place of Business 2a. Mailing Address					4. FEI Number			Applied For
21	Outle Aud	And H At And H at a					65-0420447			Not Applicable
22	Suite, Apt.	e, Apt. #, etc. Suite, Apt. #, etc. 27				I & Certificate of Status Desired I I '			•	5 Additional Required
22	City & State		City & State				6. Election Campaign Financing			May Be
23	•		28				Trust Fund Contribution Added to Fees			
	Zip			Coun	Country		8. This corporation owes or has pa	aid the c		
24		25	29	30			Personal Property Tax due June		Yes	□ No
<u> </u>		9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistere	d Agent	
		NZERA, LUCY D		١	Name)				
2317 N.W. FEDERAL HWY. STUART FL 34994					2 Street	t Addre	ess (P.O. Box Number is Not Acceptat	ole)		- <u>, ,,,,</u>
510AN1 1E 54884				8	13					
l				 						
				Įŧ	City			F	L 85 Zip	p Code
11	Pursuant i office or re agent. I a	to the provisions of Sections 607.0502 agistered agent, or both, in the State om familiar with, and accept the obligat	and 607.1508, Florida Stat of Florida. Such change wa- tions of, Section 607.0505,	utes, the abo s authorized Florida Statut	by the cotes.	d corpo rporatio	oration submits this statement for the pon's board of directors. I hereby accept	ourpose pt the ap	of changing ppointment a	j its registered as registered
Sid	3NATURE	Signature, typod or printed name of registered agent	Social of applicable (N	OTE: Registered A	Agent signatu	ariuner en	ed when reinstating)	DATE		
12	OFFICERS AI			13.			ADDITIONS/CHANGES TO OFFICE	CERS AI	ND DIRECTO	ORS IN 12
TITL	.E	D	DELET E	1.1 101.1	1.1 TITLE				Change	e 🔲 Addition
NA	AE	PANZERA, LUCY G		1.2 NAM	ΙE					
STR	EET ADDRESS	2920 BAKERSFIELD STREET		1.3 STRE	E1 ADDRESS	1				
_	Y-ST-ZIP	PORT ST. LUCIE FL 34952	Decem		- S1 - ZIP	 				
TITL	i	PANZERA, LUCY D	☐ DELETE	2.1 1111.					☐ Change	e 🔲 Addition
NA	- J	2080 ELMHURST ROAD		2.2 NAM				44		
1	EET ADDRESS	PORT ST. LUCIE FL 34952			ET ADORESS (- ST-ZIP	}		•		
TITL	Y+ST-ZIP		DELETE	3.1 TITL		+			Change	e Addition
NA	1		_	3.2 NAM		ľ			_ `	
STR	EET ADDRESS			3.3 S1RE	ET ADDRESS	. \				
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NA	AE]			4. 2 NAN	4E					
STR	EET ADDRESS			4.3 STRE	ET ADDRESS					
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TITL			☐ DELETE	5.1 T(T).		1			☐ Change	e Addition
NAA	1			5.2 NAM						
	EET ADDRESS				ET ADDRESS	Ţ				
TITL	r-ST-ZIP		DELETE	5.4 City 6.1 Title		+			Change	e 🔲 Addition
NAA	ľ		<u></u>	6.2 NAM					OBo	, , , , , , , , , , , , , , , , , , , ,
	EET ADDRESS				ET ADDRESS					
-				1		1				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 trusted 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

PANZIERA 4/20/00

FILED

Apr 27 1998 8:00am

Secretary of State