

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000054502

FILED
Jul 06, 2007
Secretary of State

Entity Name: FABULOUS FEET DANCE CENTER, INC.

Current Principal Place of Business:

1540 N.W. U.S. HIGHWAY ONE
STUART, FL 34994

New Principal Place of Business:

1967 N.E. DIXIE HWY
JENSEN BEACH, FL 34957 US

Current Mailing Address:

3340 SOUTHEAST FEDERAL HIGHWAY
SUITE 262
STUART, FL 34997 US

New Mailing Address:

FEI Number: 65-0430985 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GIANINO, PETER T
217 EAST OCEAN BLVD.
STUART, FL 34994 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOUDREAU, ROBYN
Address: 1540 N.W. U.S. HIGHWAY ONE
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. (X) Change () Addition
Name: BOUDREAU, ROBYN
Address: 3340 S.E. FEDERAL HWY # 262
City-St-Zip: STUART, FL 34997 US

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: ROBYN BOUDREAU

PRES

07/06/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date