FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY 10 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000021755 (1)**

1 Corporate Name

BRIDAL CONCEPTS, INC.

Principal Place of Business:
1688 ALT 19 STE A
PALM HARBOR FL 34683

Mailing Address:
1688 ALT 19 STE A
PALM HARBOR FL 34683

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified: 03/16/1994

3a. Date of Last Report:

4. FEI Number: 59-3259256 — 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 ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LAMBRIANOS, PENNY
1688 ALT 19 STE A
PALM HARBOR FL 34683

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: X Penny Lambrianos — 5/3/95

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

		Change	Addition
1 TITLE	PRESIDENT	☐	☒
1 NAME	LAMBRIANOS, PENNY		
1 STREET ADDRESS	1688 ALT 19, STE A		
1 CITY-ST-ZIP	PALM HARBOR, FL 34683		
2 TITLE	SECRETARY	☐	☒
2 NAME	LIAKOS, DEMETRA		
2 STREET ADDRESS	1688 ALT 19, STE A		
2 CITY-ST-ZIP	PALM HARBOR, FL 34683		
3 TITLE		☐	☐
3 NAME			
3 STREET ADDRESS			
3 CITY-ST-ZIP			
4 TITLE		☐	☐
4 NAME			
4 STREET ADDRESS			
4 CITY-ST-ZIP			
5 TITLE		☐	☐
5 NAME			
5 STREET ADDRESS			
5 CITY-ST-ZIP			
6 TITLE		☐	☐
6 NAME			
6 STREET ADDRESS			
6 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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: X Penny Lambrianos — 5/3/95 — 813-787-3850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0344251 CP