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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P94000024256 (7)

DOCUMENT #

1. Corporation Name ALETHIA'S YOUNIQUELY YOU BRIDAL BOUTIQUE & ALTER ATIONS, INC.



in the at Disease of					
•	Business	Mailing Address			
10916 ATLAN	TIC BLVD	10916 ATLANTIC BLVD SUITE 11	,		
SUITE 11 JACKSONVILLE FL 32225		JACKSONVILLE FL 32225		3 Date incorporated or Qualified 3a. Date of Last Report	
•				3. Date incorporated or Qualified 03/25/1994	04/27/1995
Principal Place	of Business .	2a. Mailing Address	- 4	4. FEI Number	Applied Fo
10916 A	TLANTIC BLVD.	26 10916 ATLAN	Txc BLVD.	59-3229747	Not Applic
Suite Apt. #,	etc.	Suite, Apt. #, etc.	¢	5. Certificate of Status Desired	\$8.75 Addition Fee Required
11#		27 SUTTE // P		6. Election Campaign Financing	\$5.00 May Be
City & State	WEDE FL.	28 JACKSONVI	ua Fl.	Trust Fund Contribution	Added to Fees
JACKSON Zip	Country	Zip	/Country	8. This corporation has liability for i	ntangible tax under s. 199.032,
3222	5 25 NUVA]	29 32225	30 DuvaL	Florida Statutes Yes	□ No
	9. Name and Address of Curren	t Registered Agent	04 No. 10	10. Name and Address of New R	egistered Agent
			81 Name	SAME	
	N, ALETHIA		82 Street Addr	ress (P.O. Box Number is Not Acceptab	le)
	BREENMORE DR.		83	SAME	
SUITE 1			03	Smrt	
JACKSU	ONVILLE FL 32225		84 City	Cana.	FL 85 Zip Code
			W. d. a. a shood pamp	ration submits this statement for the pured of directors. Thereby accept the appr	nose of changing its registered
. Pursuant to	the provisions of Sections 607.0502	and 607, 1508, Norida Sizuies	d by the corporation's boa	and of directors. Thereby accept the appr	ointment as régistered agent. La
or registered familiar with.	agent or both, in the state of Florid , and accept the obligations of, Secti	ion 607.0605. Florida Status	1-	1	2 20 00
	A/FTHTA M. NATA	Hans Mas	11.57.	a flow	2-29-96
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2.	OFFICERS ANI	D DIRECTORS DELETE	13 1 1 TIILE		DATE ICERS AND DIRECTORS IN 12 Change Add
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E. LE ME	OFFICERS AND PD HENRY NATHAN 10456 GREENMORE DR.		13. 1 TILE 12 NAME 13 STREET AUDRESS		
E. LE ME REET ADDRESS	OFFICERS AND PD HENRY NATHAN 10456 GREENMORE DR. JACKSONVILLE FL	DELETE	13. 1 TILLE 12 NAME 13 STREET ADDRESS 14 CUM ST-ZP		☐ Change ☐ Add
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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 undo oath; that I am an officer or director of the corporation or true 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:

HENRY NATHW SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-29-96 901-646-5934