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Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90177 029 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000027599

1. Corporation Name

DIANA'S BRIDAL, CO.

Principal Place of Business

7680 NW 186TH STREET
MIAMI FL 33015

Mailing Address

7680 NW 186TH STREET
MIAMI FL 33015

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1995

4. FEI Number

65-0571233

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing ☐**\$5.00** May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~BARTOLOMEI, TERESA~~
~~6709 NW 192ND TERRACE~~
~~MIAMI FL 33015~~

81 Name

MIRTA SUAREZ

82 Street Address (P.O. Box Number is Not Acceptable)

83 3781 S.W. 146 AVE.

84 City

MIRAMAR

FL

85 Zip Code

33027

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

MIRTA SUAREZ

1/19/99

12. OFFICERS AND DIRECTORS

TITLE ~~PSD~~ ☒ DELETE
 NAME ~~BARTOLOMEI, TERESA~~
 STREET ADDRESS ~~6709 NW 192ND TERRACE~~
 CITY-ST-ZIP ~~MIAMI FL 33015~~

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ DELETE
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TITLE ☐ DELETE
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ~~PSD~~ ☒ Change ☐ Addition
 1.2 NAME ~~SUAREZ, MIRTA~~
 1.3 STREET ADDRESS ~~3781 S.W. 146 AVE.~~
 1.4 CITY-ST-ZIP ~~MIRAMAR, FL. 33027~~

2.1 TITLE ☐ Change ☒ Addition
 2.2 NAME ~~SUAREZ, PEDRO~~
 2.3 STREET ADDRESS ~~3781 S.W. 146 AVE.~~
 2.4 CITY-ST-ZIP ~~MIRAMAR, FL. 33027~~

3.1 TITLE ☐ Change ☒ Addition
 3.2 NAME ~~BARTOLOMEI, TERESA~~
 3.3 STREET ADDRESS ~~3781 S.W. 146 AVE.~~
 3.4 CITY-ST-ZIP ~~MIRAMAR, FL. 33027~~

4.1 TITLE ☐ Change ☐ Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MIRTA SUAREZ

Date

Daytime Phone #

1/19/99 822-4402 (305)