

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90062 013 ***150.00

DOCUMENT # *P950000 30601*

1. Entity Name

Elegant Ladies, Inc



DO NOT WRITE IN THIS SPACE

94053838

2. Principal Place of Business

23024 Sandalfoot Dr

3. Mailing Address

Same

Suite, Apt. #, etc.

Boca Raton

Suite, Apt. #, etc.

City & State

FL

City & State

Zip

33428

Country

USA

Zip

Country

4. FEI Number

65-0589981

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Shelby Bracey-Gibbon

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

5851 Holmberg Rd #1812

City

Parkland

FL

Zip Code

33067

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

*Pres. S Bracey-Gibbon
5851 Holmberg Rd #1812
Parkland, FL 33067*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

*V.P. Laurie Barstow
5851 Holmberg Rd #1812
Parkland, FL 33067*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

S Bracey-Gibbon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-04

Date

561 883-3639

Daytime Phone #

CR2E034B (12/02)