FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

[.	Corporation QUEEN		# P9600 Y Bridal Salon	0001177 n, inc.	75 (9)							
Pr	rincipal Place	e of Busines	S	Mailing Ad	Mailing Address							
2215-A WINKLER AVE FT MYERS FL 33901 US			12670 NEV STE #101	12670 NEW BRITTANY BLVD STE #101 FT MYERS FL 33907				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/07/1996				
2.	2. Principal Place of Business			2a, Mailing	2a. Mailing Address				4. FEI Number Applied For			
21	21			26	26				65-0639255			Not Applicable
1	Suite, Apt. #, etc.			Suite, A	Suite, Apt. #, etc.				5. Certificate of Status Desired		+	5 Additional
22	City & State			[27]	City & State							Required
23	City & State	5		28	siale				6. Election Campaign Financing Trust Fund Contribution	П		O May Be d to Fees
	Zip		Country	Zip		Coun	try		This corporation owes or has p			
24			25	29		30			Personal Property Tax due Juni		Yes	□ No
		g, Name	and Address of Curr	ent Registered Ag	gent				10. Name and Address of New R	egistered	Agent	
ROYSTON, ROBERT D JR. 12670 NEW BRITTANY BLVD. FORT MYERS FL 33907						8	31 32 33	Street Addre	Address (P.O. Box Number is Not Acceptable)			
						8	14	City		FL	85 Z	ip Code
	ag ent. I at GNATU RE	m (am iliar wi	th, and accept the ob-	igations of, Section	0 607.0505, F	lorida Statut	tes		oration submits this statement for the on's board of directors. I hereby accended the orange of the	purpose of pt the app	changing ointment	g its registered as registered
12	· · · · · · · · · · · · · · · · · · ·	ĀDAT	OFFICERS A	ND DIRECTORS	Or ere	13.			ADDITIONS/CHANGES TO OFFI	CERS AND		
TIT		DPST	ATUV A	;	☐ DELETE	1.1 TITU					Chang	e 🔲 Addition
STREET ADDRESS CITY-ST-ZIP LILLY, KATHY A 2315 SOUTHWEST 5TH AVEN CAPE CORAL FL			ENUE			ETA	ADDRESS					
TIT	Y-ST-ZIP	UMPC U	ORAL FL		DELETE	1.4 CITY 2.1 TITU	_	I - ZIP			☐ Chang	e Addition
NAI	1			•		2.2 NAM						o
ı	REET ADORESS							ADDRESS				
	Y-ST-Z1P					2. 4 GIT1				.		
TIT	LE .				DELETE	3.1 TITLI					Chang	e Addition
NAI	ME					3.2 NAM	E					
STE	REET ADDRESS					3.3 STRE	E1 /	ADDRESS ()			
	Y-ST-ZIP				60,675	3.4. City		T- ZIP			-	
100				ļ	DELETE	4.1 TITLI					Chang	e Addition
NA	i i					4. 2 NAN						
	REET ADDRESS							ADDRESS	•			
TITI	Y-ST-ZIP				DELETE	4.4 CITY 5.1 TITLE		- ZIP			Chang	e Addition
NA.				1	Land December	5.1 IIILI 5.2 NAM					L. J. Ollorly	· LI AMINON
ŀ	REET ADDRESS							ADDRESS				
	Y-ST-ZIP					5.4 CiTY						
TIT					DELETE	6.1 TITLE					Chang	e Addition
NAI	ME					6.2 NAM					•	
i i	CET ADDDECC							ADDOCCO.				

14. Thereby 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 trusted 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.

6.4 CiTY - ST - ZIP

FILED

May 01 1998 8:00am

Secretary of State