

2000 UNIFORM BUSINESS REPORT (UBR)

5/3

FILED

Jul 07, 2000 8:00 am
Secretary of State

05-30-2000 90103 006 ***150.00

DOCUMENT # P99000025990

1. Entity Name

EXQUISITE BRIDALS & ALTERATIONS, INC.

Principal Place of Business

4221 EMPRESS ST
PALM BEACH GARDENS,
FL 33410

Mailing Address

4221 EMPRESS ST
PALM BEACH GARDENS,
FL 33410

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0949103

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GERASIMOS KAMBITISIS
4221 EMPRESS ST
PALM BEACH GARDENS, FL 33410

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

GERASIMOS KAMBITISIS, Vice Pres. & Reg Agt

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

AFTER MAY 1, 2000, Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P S D	☐ Delete
NAME	SOPHIA KAMBITISIS KREIDY	
STREET ADDRESS	4221 EMPRESS ST	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410	
TITLE	T D	☐ Delete
NAME	EVAGELIA KAMBITISIS	
STREET ADDRESS	4221 EMPRESS ST	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410	
TITLE	VP	☐ Delete
NAME	GERASIMOS KAMBITISIS	
STREET ADDRESS	4221 EMPRESS ST	
CITY-ST-ZIP	PALM BEACH GARDENS, FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 807, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

(561) 630-1999

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GERASIMOS KAMBITISIS, VP April 14, 2000

Date

Daytime Phone #