

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004562

Entity Name: WEDDINGPAGES, INC.

FILED
Jan 04, 2010
Secretary of State

Current Principal Place of Business:

11106 MOCKINGBIRD DRIVE
OMAHA, NE 68137

New Principal Place of Business:

Current Mailing Address:

11106 MOCKINGBIRD DRIVE
OMAHA, NE 68137

New Mailing Address:

FEI Number: 47-0708987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VCFO
Name: ALLEN, CRAIG
Address: 11106 MOCKINGBIRD DRIVE
City-St-Zip: OMAHA, NE 68137

Title: S
Name: RUBIN, JANET
Address: 11106 MOCKINGBIRD DRIVE
City-St-Zip: OMAHA, NE 68137

Title: D
Name: LIU, DAVID
Address: 462 BROADWAY 6TH FLOOR
City-St-Zip: NEW YORK, NY 10013

Title: D
Name: STILES, SANDRA
Address: 462 BROADWAY 6TH FLOOR
City-St-Zip: NEW YORK, NY 10013

Title: VP
Name: DOLPHENS, FRANK
Address: 11106 MOCKINGBIRD DRIVE
City-St-Zip: OMAHA, NE 68137

Title: VP
Name: HILL, LISA
Address: 11106 MOCKINGBIRD DRIVE
City-St-Zip: OMAHA, NE 68137

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG ALLEN

VCFO

01/04/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date