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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 831283 BRIDAL FAIR, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				{ I EELEN IBADO ILIAN WELD JIDEL IDADO HII GIBH	REAL BIRLI GIAN BIAN BIAN LARI
11248 JOHN GALT BLVD. 11248 JOHN GALT BLVD.					
OMAHA NE 68137 OMAHA NE 68137				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	1IS SPACE
				11/16/1973	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	2 50, 156TH CIR		Stry Cik	47-0522177	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	V V V V V V V V V V V V V V V V V V V		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
	AHA NE)E.	Trust Fund Contribution	Added to Fees
Ζφ	36 25 Country	Zip '	Country	8. This corporation owes or has paid the	
24 681			O VSA	Personal Property Tax due June 30.	Yes X No
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 81 Name Name					
1201 HAYS STREET					
SUITE 105			62 Street Addr	ress (P.O. Box Number is Not Acceptable)	
TALLAHASSEE FL 32301			83		
, ,,,					
			84 City	F	EL 85 Zip Code
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					
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 registere agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE De tor Atelle dec. (Tros					19 0
Signature typed or printed transcrib registered agent and site if applicable (NOTE Regi			Registered Agent signature requir		E
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	TUICDALITU CUEDOV	☐ DELETE	1.1 TITLE		Change Addition
NAME	THIEBAUTH, SHERRY 20580 RAWHIDE RD.		1.2 NAME		
STREET ADDRESS	ELKHORN NE		1.3 STREET ADDRESS		
CITY-ST-ZHP TITLE	PD	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	THIEBAUTH, BRUCE E.		1		C Cuange C Addition
STREET ADDRESS	20580 RAWHIDE RD.		22 NAME 23 STREET ADDRESS		
CITY-ST-ZIP	ELKHORN NE		2.4 City-ST-ZIP	*	
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	MOORE, DWIGHT J.		3.2 NAME		
STREET ADDRESS	20625 ROUNDUP CIR		3.3 STREET ADDRESS		
CITY-ST-ZIP	elkhorn ne		3.4. CITY - ST - ZIP		
TITLE	डा	DELETE	41 TITLE		Change Addition
NAME	STEFFEN, LESTER V.		4. 2 NAME		
STREET ADDRESS	12410 CLARKSON AVE.		4.3 STREET ADDRESS		
CITY-ST-ZIP	OMAHA NE		4.4 CITY - ST - ZIP		
TITLE	D DARDELL	☐ DELETE	5.1 TITLE		Change Addition
NAME	VINCENT, DARRELL		5.2 NAME		
STREET ADDRESS	11248 JOHN GALT BLVD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	OMAHA NE	T or ere	5 4 CITY - ST - ZIP		Channe Laddy
TITLE	D THICRAFITH ROUGE D	DELETE	6 1 TITLE		Change Addition
NAME	THIEBAUTH, BRUCE R 15112 Z STREET		6.2 NAME		
STREET ADDRESS	OMAHA NE		6.3 STREET ADDRESS		
CITY-ST-ZIP	OWN IV IVE		6.4 CITY - ST - ZIP		

14. Thereby certify that the information supplied with this tiling 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.

SIGNATURE:

(402) 330-8900