

FILED  
Mar 15, 2007 8:00 am  
Secretary of State

02-23-2007 90037 041 \*\*\*150.00

2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                 |                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # J32932</b><br>1. Entity Name<br><b>DESIGNER HARDWARE, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                 |                                           |
| Principal Place of Business<br><b>625 BEACHLAND BLVD<br/>VERO BEACH, FL 32983</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 | Mailing Address<br><b>625 BEACHLAND BLVD<br/>VERO BEACH, FL 32983</b>                                                      |
| <b>DO NOT WRITE IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                                                                                                            |
| 5. Name and Address of Current Registered Agent<br><b>WELCH, ROBERT G. JR.<br/>625 BEACHLAND BLVD<br/>VERO BEACH, FL 32983</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                 | <b>DO NOT WRITE<br/>IN THIS SPACE</b>                                                                                      |
| 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.<br>SIGNATURE: <u>Robert G. Welch Jr</u> <b>ROBERT G. WELCH JR</b> <u>FEB 14, 2007</u><br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE</small>                                                                                                                                                      |                                                                 |                                                                                                                            |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$650.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | P<br>WELCH, ROBERT G. JR<br>625 BEACHLAND BLVD<br>VERO BCH., FL |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                                                                                                            |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other true employees. |                                                                 |                                                                                                                            |
| SIGNATURE: <u>Robert G. Welch Jr</u> <b>ROBERT G. WELCH JR</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 | <u>3-8-07</u> (772)<br><u>202/4407</u> <b>231-5844</b><br><small>Date Daytime Phone #</small>                              |

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02132007 No Chg-P CR2E034 (11/05)

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| 4. FEI Number<br><b>59-2717726</b>                                                                  | Applied For<br><input checked="" type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional<br/>Fee Required</b> |                                                                   |