JUL-06-2005(WED) 13:24   C R COOPER CPA PA   (FF

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Jul 11, 2005 8:00 am
Secretary of State
07-11-2005 90200 001 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000060159

1. Entity Name
HOLIDAY LIGHTING DESIGNS, INC.

20062744

Principal Place of Business	Mailing Address
1599 SW 30TH AVE - STE 14 BOYNTON BEACH, FL 33426	1599 SW 30TH AVE - STE 14 BOYNTON BEACH, FL 33426

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

07082005   Chg-P   CR2E034 (10/03)

4. FEI Number 30-0179841   Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DELAAR, MICHAEL
5604 PRISCILLA LANE
LAKE WORTH, FL 33463

7. Name and Address of New Registered Agent

Name: DELAAR, MICHAEL
Street Address (P.O. Box Number Is Not Acceptable): 6340 STONEHURST CIRCLE
City: LAKE WORTH   FL   Zip Code: 33467

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.

SIGNATURE: [signature]   7/8/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)   Date

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELAAR, MICHAEL 5604 PRISCILLA LANE LAKE WORTH, FL 33463	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELAAR, MICHAEL 6340 STONEHURST CIRCLE LAKE WORTH, FL 33467	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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 like empowered.

Sign Here

SIGNATURE: [signature]   7/8/05   561-734-7277
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

ATTACHMENT
20062744

C.R. COOPER, CPA, PA
1495 FOREST HILL BLVD STE B
WEST PALM BEACH, FLORIDA 33406

American Institute of
Certified Public Accountants (561) 964-6927
(561) 432-0008

Florida Institute of
Certified Public Accountants FAX (561) 433-3596

July 6, 2005

Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Taxpayer: HOLIDAY LIGHTING DESIGNS, INC
Document #: P03000060159
FEIN: 30-0179841
Tax Form: UBR
Tax Period: 2005

To Whom It May Concern:

We have enclosed check # 1429 in the amount of $150.00 for the 2005 Annual Renewal of. HOLIDAY LIGHTING DESIGNS, INC, Document # P03000060159.

Please abate the penalty as Mr.Delaar did not receive the original UBR. The Corporation did not intentionally avoid the filing fee.

Thank you for your prompt attention to this matter. Please contact our office if any further information or explanation is required.

Respectfully,

C. R. Cooper, CPA

Encl.

cc