


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 24, 2004 8:00 am
Secretary of State

09-24-2004 90002 023 ***150.00

DOCUMENT # P03000125024

1. Entity Name
SUZANNE GUASCH DESIGNS, INC.



Principal Place of Business Mailing Address

540 BRICKELL KEY DRIVE #909 **540 BRICKELL KEY DRIVE #909**
MIAMI, FL 33131 **MIAMI, FL 33131**

34073462



2. Principal Place of Business 3. Mailing Address

5805 BLUE LAGOON DR. **SAME**

Suite, Apt. #, etc. Suite, Apt. #, etc.

410

09212004 Chg-P CR2E034 (10/03)

City & State City & State

MIAMI FL

4. FEI Number Applied For

20-0743990 Not Applicable

Zip Country Zip Country

33126 USA

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

6. Name and Address of Current Registered Agent

GUASCH, SUZANNE
540 BRICKELL KEY DR #909
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name

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

801 BRICKELL KEY DR #1612

City State Zip Code

MIAMI FL 33131

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: *Suzanne F. Guasch* **Suzanne F. Guasch, President 9/21/04**

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 8, 2004

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

TITLE	PT <input type="checkbox"/> Delete
NAME	GUASCH, SUZANNE
STREET ADDRESS	540 BRICKELL KEY DR #909
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	VPS <input type="checkbox"/> Delete
NAME	PEREZ-ABREU, EMELINA
STREET ADDRESS	540 BRICKELL KEY DRIVE #1224
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRES.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUZANNE F. GUASCH	
STREET ADDRESS	801 BRICKELL KEY DR #1612	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE: *Suzanne F. Guasch* **Suzanne F. Guasch** **9/21/04** **305 979 6606**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

9-21-04

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Gentlemen,

I looked on the internet today and checked the box which states I did not receive any notice of my annual report since I have a different address. I am submitting my check for the annual report.

My company has not been operating ^{before} until this month of September.

Thank You,

Suzanne Guasch
Suzanne Guasch Designs, LLC
305 979-6606