2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000043962

Entity Name: T. RUSCICA DESIGNS, INC.

FILED Mar 08, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

345 OCEAN DRIVE, #1126 5600 COLLINS AVENUE #16S MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

345 OCEAN DRIVE, #1126 5600 COLLINS AVENUE #16S MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33140

FEI Number: 20-2537344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUSCICA, THOMAS C
345 OCEAN DRIVE, #1126
MIAMI BEACH, FL 33139 US

RUSCICA, THOMAS C
5600 COLLINS AVENUE #16S
MIAMI BEACH, FL 33140 US

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: THOMAS RUSCICA 03/08/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

PVST () Delete Title: PVST (X) Change () Addition

 Name:
 RUSCICA, THOMAS C
 Name:
 RUSCICA, THOMAS C

 Address:
 345 OCEAN DRIVE, #1126
 Address:
 5600 COLLINS AVENUE #16S

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: D () Delete Title: D (X) Change () Addition

 Name:
 RUSCICA, THOMAS C
 Name:
 RUSCICA, THOMAS C

 Address:
 345 OCEAN DRIVE, #1126
 Address:
 5600 COLLINS AVENUE #16S

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: THOMAS RUSCICA PD 03/08/2007