

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000118810

FILED
Apr 22, 2008
Secretary of State

Entity Name: ADF DESIGN, CORP.

Current Principal Place of Business:

520 SE 5TH AVE.
SUITE 1405
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

1883 OPA-LOCKA BLVD.
OPA-LOCKA, FL 33054

Current Mailing Address:

520 SE 5TH AVE.
SUITE 1405
FORT LAUDERDALE, FL 33301

New Mailing Address:

1883 OPA-LOCKA BLVD.
OPA-LOCKA, FL 33054

FEI Number: 20-5544144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPARRO, DAVID A
520 SE 5TH AVE.
SUITE 1405
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

CHAPARRO, DAVID A
1883 OPA-LOCKA BLVD.
OPA-LOCKA, FL 33054 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: DAVID A. CHAPARRO

04/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHAPARRO, DAVID A
Address: 520 SE 5TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: DUARTE, MARLEN
Address: 520 SE 5TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: CHAPARRO, GUSTAVO
Address: 520 SE 5TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHAPARRO, DAVID A
Address: 1883 OPA LOCKA BLVD.
City-St-Zip: OPA LOCKA, FL 33054

Title: D (X) Change () Addition
Name: DUARTE, MARLEN
Address: 1530 NW 128TH DR. APT. 202
City-St-Zip: SUNRISE, FL 33323

Title: D (X) Change () Addition
Name: CHAPARRO, GUSTAVO
Address: 1530 NW 128TH DR. APT. 202
City-St-Zip: SUNRISE, FL 33323

I hereby certify that the information supplied with this filing does not qualify 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: DAVID A. CHAPARRO

PD

04/22/2008

Electronic Signature of Signing Officer or Director

Date