

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Sep 15, 2008  
Secretary of State**

DOCUMENT# P06000139077

Entity Name: BELLAVI DESIGNS INC

**Current Principal Place of Business:**23110 SR 54  
SUITE 160  
LUTZ, FL 33549**New Principal Place of Business:**5590 B COACH HOUSE CIRCLE  
BOCA RATON, FL 33486**Current Mailing Address:**23110 SR 54  
SUITE 160  
LUTZ, FL 33549**New Mailing Address:**5590 B COACH HOUSE CIRCLE  
BOCA RATON, FL 33486

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**CIFUENTES, ADRIANA  
23110 SR 54  
SUITE 160  
LUTZ, FL 33549 US**Name and Address of New Registered Agent:**MOORE, HOLLY  
5590 B COACH HOUSE CIRCLE  
BOCA RATON, FL 33486 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: HOLLY MOORE

09/15/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title:                      P                      ( ) Delete  
Name:                      CIFUENTES, ADRIANA  
Address:                      23110 SR 54 #160  
City-St-Zip:                      LUTZ, FL 33549Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title:                      P                      (X) Change ( ) Addition  
Name:                      MOORE, HOLLY  
Address:                      5590 B COACH HOUSE CIRCLE  
City-St-Zip:                      BOCA RATON, FL 33486Title:                      VP O                      ( ) Change (X) Addition  
Name:                      DUPONT, NAN  
Address:                      5590 B COACH HOUSE CIRCLE  
City-St-Zip:                      BOCA RATON, FL 33486

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: HOLLY MOORE

P

09/15/2008

Electronic Signature of Signing Officer or Director

Date