

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000054461

FILED
Apr 30, 2007
Secretary of State

Entity Name: VAN DER VALK DESIGN, INC.

Current Principal Place of Business:

4555 E WINDMILL DRIVE
INVERNESS, FL 34453

New Principal Place of Business:

Current Mailing Address:

PO BOX 430401
KISSIMMEE, FL 34743

New Mailing Address:

FEI Number: 59-3505336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IDEAL OPPORTUNITIES INC.
316 N JOHN YOUNG PKWY
SUITE 14
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: MASTER, CHRISTIAAN G
Address: 316 N JOHN YOUNG PKWY STE 14
City-St-Zip: KISSIMMEE, FL 34741

Title: VD (X) Delete
Name: GROENENDIJK, PETER
Address: 316 N JOHN YOUNG PKWY STE 14
City-St-Zip: KISSIMMEE, FL 34741

Title: PS (X) Delete
Name: GROENENDIJK, ANNELIESE
Address: 316 N JOHN YOUNG PKWY STE 14
City-St-Zip: KISSIMMEE, FL 34741

Title: V () Delete
Name: MATSER, INGRID
Address: 316 N JOHN YOUNG PKWY STE 14
City-St-Zip: KISSIMMEE, FL 34741

Title: V (X) Delete
Name: MAJEED, BEBE N
Address: 316 N JOHN YOUNG PARKWAY, SUITE 14
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PV (X) Change () Addition
Name: MATSER, INGRID
Address: 316 N JOHN YOUNG PKWY STE 14
City-St-Zip: KISSIMMEE, FL 34741

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PETER J GROENENDIJK

D

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date