

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90220 042 ***150.00

DOCUMENT # **P99000005527**

1. Entity Name
DESIGN GOLD GROUP, INC.



Principal Place of Business
**2040 DEWEY STREET
HOLLYWOOD FL 33020**

Mailing Address
**2040 DEWEY STREET
HOLLYWOOD FL 33020**



2. Principal Place of Business

157 N. NOB HILL RD

3. Mailing Address

157 N. NOB HILL RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

PLANTATION, FL.

City & State

PLANTATION, FL.

4. FEI Number

65-0890238

Applied For

Not Applicable

Zip

Country

33324

USA

Zip

Country

33324

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SILVERMAN, MARK E
2040 DEWEY ST
HOLLYWOOD FL 33020**

7. Name and Address of New Registered Agent

Name
SILVERMAN, MARK E.
Street Address (P.O. Box Number, is Not Acceptable)
157 N. NOB HILL ROAD
City
PLANTATION FL Zip Code
33324

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 * *Mark E Silverman*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/28/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|---------------------|-------------------|--------------------|---------------------------------|
| CEOD | SILVERMAN, MORTON I | 2040 DEWEY STREET | HOLLYWOOD FL 33020 | <input type="checkbox"/> |
| PD | SILVERMAN, MARK E | 2040 DEWEY STREET | HOLLYWOOD FL 33020 | <input type="checkbox"/> |
| STD | SILVERMAN, GENE H | 2040 DEWEY STREET | HOLLYWOOD FL 33020 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|---------------------|----------------------|----------------------|-------------------------------------|-----------------------------------|
| CEOD | SILVERMAN, MORTON I | 157 N. NOB HILL ROAD | PLANTATION, FL 33324 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| PD | SILVERMAN, MARK E. | 157 N. NOB HILL ROAD | PLANTATION, FL 33324 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| STD | SILVERMAN, GENE H. | 157 N. NOB HILL ROAD | PLANTATION, FL 33324 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: * *SIGNATURE REQUIRED*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/03

Date

954-424-2884

Daytime Phone #

CR2E034 (10/02)