## **2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 492029** 

Entity Name: DESIGN-GRAPHICS, INC.

**Current Principal Place of Business:** 

405 LEXINGTON AVENUE NEW YORK. NY 10174

**Current Mailing Address:** 

405 LEXINGTON AVENUE NEW YORK. NY 10174 US

FEI Number: 59-1640872 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Electronic Signature of Registered Agent

Date

FILED Apr 12, 2021

Secretary of State

0502753023CC

Officer/Director Detail:

TitleTREASURERTitleCEO, PRESIDENTNameKARABAS, JONATHAN DNameMALE, JEREMY J

Address 405 LEXINGTON AVENUE Address 405 LEXINGTON AVENUE

City-State-Zip: NEW YORK NY 10174 City-State-Zip: NEW YORK NY 10174

Title DIRECTOR, EXECUTIVE VICE Title DIRECTOR, SENIOR VICE PRESIDENT

PRESIDENT Name WOOD, GEORGE

 Name
 SAUER , RICHARD H
 Address
 405 LEXINGTON AVENUE

 Address
 405 LEXINGTON AVENUE

City-State-Zip: NEW YORK NY 10174

Title EXECUTIVE VICE PRESIDENT, CHIEF

EXECUTIVE VICE PRESIDENT, CHIEF REVENUE OFFICER Name TOSTANOSKI, NANCY

Name PUNTER, CLIVE Address 405 LEXINGTON AVENUE

Address 405 LEXINGTON AVENUE City-State-Zip: NEW YORK NY 10174

City-State-Zip: NEW YORK NY 10174

Title EXECUTIVE VICE PRESIDENT

Title SENIOR VICE PRESIDENT Name SENESE, JODI

Name SIRY, THEODORE G Address 405 LEXINGTON AVENUE

Address 405 LEXINGTON AVENUE City-State-Zip: NEW YORK NY 10174

City-State-Zip: NEW YORK NY 10174 Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: CAPOCASALE, LOUIS J. CORPORATE 04/12/2021 SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title CORPORATE SECRETARY
Name CAPOCASALE, LOUIS J
Address 405 LEXINGTON AVENUE
City-State-Zip: NEW YORK NY 10174