#### 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. DPT

#### SIGNATURE: PAULO BACCHI

Electronic Signature of Signing Officer/Director Detail

### 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# P01000118155

Entity Name: DESIGN PLACE INC.

# **Current Principal Place of Business:**

4440 PONCE DE LEON BLVD. **SUITE 1600** CORAL GABLES, FL 33146

## **Current Mailing Address:**

1001 BRICKNELL BAY DRIVE **SUITE 2406** MIAMI, FL 33131 US

# FEI Number: 26-0051179

# Name and Address of Current Registered Agent:

PAULO, BACCHI 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	PAULO BACCHI			01/26/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DPT	Title	S	
Name	BACCHI, PAULO	Name	MIRANDA, PAULO	
Address	ONE S.E 3RD AVE , 25TH FLOOR	Address	7155 LOS PINOS BLVD	
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	CORAL GABLES FL 33143	

Certificate of Status Desired: No

01/26/2021

FILED Jan 26, 2021 Secretary of State 0392551734CC

Date