

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000088495

**FILED**  
**Jan 07, 2013**  
**Secretary of State**  
**CC8216558665**

**Entity Name:** CELLOS DESIGN INC

**Current Principal Place of Business:**

5300 NW 12 AVE  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

5300 NW 12 AVE  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DEVASCONCELOS, FABIO P  
5300 NW 12 AVE  
FORT LAUDERDALE, FL 33309 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

**Officer/Director Detail :**

Title P  
Name DEVASCONCELOS, FABIO P  
Address 5300 NW 12 AVE  
City-State-Zip: FORT LAUDERDALE FL 33309

Title VP  
Name DEVASCONCELOS, CLEYDSON P  
Address 5300 NW 12 AVE  
City-State-Zip: FORT LAUDERDALE FL 33309

Title TREASURER  
Name VASCONCELOS, CINTHIA P  
Address 5300 NW 12 AVE  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name FERREIRA, CLAYTON  
Address 5300 NW 12 AVE  
City-State-Zip: FORT LAUDERDALE FL 33309

*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:** FABIO DEVASCONCELOS

**PRESIDENT**

**01/07/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date