

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 467872 (8)

1. Corporation Name

DESIGNS UNLIMITED, INC.



Principal Place of Business

1301 DADE BOULEVARD
MIAMI BEACH FL 33139

Mailing Address

1301 DADE BOULEVARD
MIAMI BEACH FL 33139

3. Date Incorporated or Qualified

12/16/1974

3a. Date of Last Report

02/01/1995

2. Principal Place of Business

2a. Mailing Address

21 12000 BISCAYNE BOULEVARD

26 12000 BISCAYNE BOULEVARD

4. FEI Number

59-1565432

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WINZELL, DANIEL L
1301 DADE BOULEVARD
MIAMI BEACH, FL
33139

81 Name WINZELL, DANIEL L.

82 Street Address (P.O. Box Number is Not Acceptable)
12000 BISCAYNE BOULEVARD

83 SUITE 803

84 City MIAMI

FL 85 Zip Code
33181

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the filer

(If filer is Registered Agent, signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.1 TITLE

1.2 NAME

1.2 NAME

1.3 STREET ADDRESS

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

1.4 CITY-STATE-ZIP

2.1 TITLE

2.1 TITLE

2.2 NAME

2.2 NAME

2.3 STREET ADDRESS

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

2.4 CITY-STATE-ZIP

3.1 TITLE

3.1 TITLE

3.2 NAME

3.2 NAME

3.3 STREET ADDRESS

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

3.4 CITY-STATE-ZIP

4.1 TITLE

4.1 TITLE

4.2 NAME

4.2 NAME

4.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

4.4 CITY-STATE-ZIP

5.1 TITLE

5.1 TITLE

5.2 NAME

5.2 NAME

5.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

5.4 CITY-STATE-ZIP

6.1 TITLE

6.1 TITLE

6.2 NAME

6.2 NAME

6.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Daniel L. Winzell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/96

305 893-6333

Date

Daytime Phone #

CR2E034 (12/95)