

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03638

FILED
Apr 21, 2009
Secretary of State

Entity Name: AIP DESIGN, INC.

Current Principal Place of Business:

976 LAKE BALDWIN LANE
SUITE 202
ORLANDO, FL 32814

New Principal Place of Business:

Current Mailing Address:

976 LAKE BALDWIN LANE
SUITE 202
ORLANDO, FL 32814

New Mailing Address:

FEI Number: 59-2036388 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ-CHAVEZ, ERNESTO
1650 WALNUT AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ-CHAVEZ, ERNESTO
Address: 1650 WALNUT AVE
City-St-Zip: WINTER PARK, FL 00000,

Title: TD () Delete
Name: GONZALEZ-CHAVEZ, MERCEDES
Address: 1650 WALNUT AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: SD () Delete
Name: DIAZ, PEDRO
Address: 976 LK BALDWIN LN
City-St-Zip: ORLANDO, FL 32814

Title: VD () Delete
Name: GONZALEZ-CHAVEZ, ERNESTO J
Address: 1660 WALNUT AVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ERNESTO GONZALEZ-CHAVEZ

PD

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date