

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000000654

Entity Name: DESIGN LAB, INC.

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3705 LOCUST HILL ROAD  
TAYLORS, SC 29687

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 27133  
GREENVILLE, SC 29616

**New Mailing Address:**

FEI Number: 56-2051141

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOLLER, ELIZABETH M  
33RD INDUSTRIAL CENTER #5, 4203 34TH ST.  
ORLANDO, FL 32811 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

**OFFICERS AND DIRECTORS:**

Title: C  
Name: MOLLER, DORIS  
Address: 825 OLD AIRPORT RD.  
City-St-Zip: GREENVILLE, SC 29607

Title: P  
Name: MOLLER, ELIZABETH  
Address: 825 OLD AIRPORT RD.  
City-St-Zip: GREENVILLE, SC 29607

Title: V  
Name: SPINA, ROBIN  
Address: 1201 BIMINI LANE  
City-St-Zip: RIVIERA BEACH, FL 33404

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: DORIS MOLLER

CEO

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date