

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90319 007 ***150.00

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1. Entity Name
HUB DESIGNS, INC.



Principal Place of Business
**2501 EAST GUASTI ROAD
ONTARIO, CA 91761**

Mailing Address
**2501 EAST GUASTI ROAD
ONTARIO, CA 91761**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02282005

Chg-P

CR2E034 (10/03)

4. FEI Number
20-0456076

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LEDER, MARC J 5200 TOWN CENTER CIR. SUITE 470 BOCA RATON, FL 33486	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KROUSE, RODGER R 5200 TOWN CENTER CIR. SUITE 470 BOCA RATON, FL 33486	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V TERRY, CLARENCE E 5200 TOWN CENTER CIR. SUITE 470 BOCA RATON, FL 33486	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V CALHOUN, KEVIN 5200 TOWN CENTER CIR. SUITE 470 BOCA RATON, FL 33486	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ALLEN, JAMES D 5200 TOWN CENTER CIR. SUITE 470 BOCA RATON, FL 33486	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V KING, T. SCOTT 5200 TOWN CENTER CIR. SUITE 470 BOCA RATON, FL 33486	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Bush, Michael 2501 East Guasti Road Ontario, CA 91761	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Langsdorf, William 2501 East Guasti Road Ontario, CA 91761	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Gregg, Elaine 2501 East Guasti, Road Ontario, CA 91761	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director, Vice President Calhoun, Kevin 5200 Town Center Cir, Ste 470 Boca Raton, FL 33486	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director, Vice President Allen, James D 5200 Town Center Cir, Ste 470 Boca Raton, FL 33486	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William Langsdorf
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/3/05