

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006268

Entity Name: DESIGN DRIVE, INC.

FILED
Feb 21, 2007
Secretary of State

Current Principal Place of Business:

2044 AUSTIN
ROCHESTER HILLS, MI 48309

New Principal Place of Business:

Current Mailing Address:

2044 AUSTIN
ROCHESTER HILLS, MI 48309

New Mailing Address:

FEI Number: 04-3590294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIOVANELLI, BEN CPA
4508 PLYMOUTH SORREUTO RD
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

JORISSEN, LISA
29446 SARATOGA
BIG PINE KEY, FL 33043 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: LISA JORISSEN

02/21/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SEC () Delete
Name: BROIDY, ELLIOTT
Address: 2044 AUSTIN
City-St-Zip: ROCHESTER HILLS, MI 48309

Title: CHR () Delete
Name: MCALEAR, THOMAS
Address: 2044 AUSTIN
City-St-Zip: ROCHESTER HILLS, MI 48309

Title: PRES () Delete
Name: OTIS, KEVIN
Address: 2044 AUSTIN
City-St-Zip: ROCHESTER HILLS, MI 48309

Title: TRES (X) Delete
Name: LEE, PING
Address: 2044 AUSTIN
City-St-Zip: ROCHESTER HILLS, MI 48309

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 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: APRIL S BOYD

ACTG

02/21/2007

Electronic Signature of Signing Officer or Director

Date