

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2008 8:00 am
Secretary of State

03-06-2008 90047 011 ***150.00

DOCUMENT # F06000004303

1. Entity Name
ROBIN BELL DESIGN CORP.



Principal Place of Business
128 EAST 61ST STREET
NEW YORK, NY 10021

Mailing Address
128 EAST 61ST STREET
NEW YORK, NY 10021

40039816



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

176 Broadway
Suite, Apt. #, etc.
Apt 12C

PO Box 3323
Suite, Apt. #, etc.

01172008 Chg-P CR2E034 (12/06)

City & State

City & State

New York, NY

Vero Beach, FL

4. FEI Number
68-0630692

Applied For
Not Applied

Zip

Country

Zip

Country

10038 USA

334104 - USA

5. Certificate of Status Desired ☐ - \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301

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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CHRM	<input type="checkbox"/> Delete
NAME	BELL, ROBIN	
STREET ADDRESS	128 EAST 61ST STREET	
CITY - ST - ZIP	NEW YORK, NY 10021	
TITLE	PVT	<input type="checkbox"/> Delete
NAME	BELL, ROBIN	
STREET ADDRESS	128 EAST 61ST STREET	
CITY - ST - ZIP	NEW YORK, NY 10021	
TITLE	S	<input type="checkbox"/> Delete
NAME	BRIGHAM, ALANA	
STREET ADDRESS	128 EAST 61ST STREET	
CITY - ST - ZIP	NEW YORK, NY 10021	
TITLE		<input type="checkbox"/> Delete
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CITY - ST - ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS	176 Broadway, Apt 12C	
CITY - ST - ZIP	NY, NY 10038	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS	176 Broadway, Apt 12C	
CITY - ST - ZIP	NY, NY 10038	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS	PO Box 3323	
CITY - ST - ZIP	Vero Beach, FL 334104	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE