

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004710

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: DESIGN GROUP CARL ROSS INC.

**Current Principal Place of Business:**

115 MAIN STREET  
EL SEGUNDO, CA 90245

**New Principal Place of Business:**

**Current Mailing Address:**

115 MAIN STREET  
EL SEGUNDO, CA 90245

**New Mailing Address:**

FEI Number: 95-4565876      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

PARACORP INCORPORATED  
236 EAST 6TH AVE  
TALLAHASSEE, FL 32303      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: DP ( ) Delete  
Name: ROSS, CARL  
Address: 115 MAIN STREET  
City-St-Zip: EL SEGUNDO, CA 90245

Title: DST ( ) Delete  
Name: ROSS, ROSANNA O  
Address: 115 MAIN STREET  
City-St-Zip: EL SEGUNDO, CA 90245

Title: V ( ) Delete  
Name: AHRENS, JOELLE F  
Address: 115 MAIN STREET  
City-St-Zip: EL SEGUNDO, CA 90245

**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:

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: ROSANNA O. ROSS

DST

03/21/2009

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

\_\_\_\_\_ Date