

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F96000005873

1. Entity Name
PREMIER DESIGNS, INC.



Principal Place of Business
**1551 CORPORATE DRIVE
IRVING, TX 75038**

Mailing Address
**1551 CORPORATE DRIVE
IRVING, TX 75038**



04202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-2074326

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

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, 2004 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	PD HORNER, ANDREW J 1551 CORPORATE DRIVE IRVING, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDEV HORNER, JOAN V 1551 CORPORATE DRIVE IRVING, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD JOHNSON, JAMES A 1551 CORPORATE DRIVE IRVING, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HORNER, THOMAS W 1551 CORPORATE DRIVE IRVING, TX 75038
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRAPER, JAMES R 1551 CORPOATE DRIVE IRVING, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000136900
04/29/04-80020-007 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

James A. Johnson
James A. Johnson

4-20-04
Date

972-550-0955
Daytime Phone #