

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90031 041 ***150.00

DOCUMENT # F98000004747

1. Corporation Name

DESIGN APPEAL RRR INC.

Principal Place of Business

**5208 GRAND AVENUE
MASPETH NY 11378**

Mailing Address

**5208 GRAND AVENUE
MASPETH NY 11378**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/19/1998

4. FEI Number

11-3308166

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Design Appeal

2a. Mailing Address

26 Design Appeal

Suite, Apt. #, etc.

22 2303 Stirling Rd

Suite, Apt. #, etc.

27 2303 Stirling Rd

City & State

23 Dania, FL

City & State

28 Dania, FL

Zip

24 33312

Country

25 Broward

Zip

29 33312

Country

30 Broward

9. Name and Address of Current Registered Agent

**MARK, ROBERT
2303 STIRLING ROAD
DANIA FL 33312**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **Dania**

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Robert Mark

Robert Mark

2/7/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PCSD
MARK, ROBERT**
STREET ADDRESS **68-61 YELLOWSTONE BLVD**
CITY-ST-ZIP **FOREST HILL NY**

TITLE ☐ DELETE

NAME **VTD
MARK, DAVID J**
STREET ADDRESS **5001 N. 37TH STREET**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME **VD
MARK, MICHAEL S**
STREET ADDRESS **3431 SW 52ND STREET**
CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition

12 NAME
13 STREET ADDRESS **3300 NE 191st St Apt 1507**
14 CITY-ST-ZIP **Aventura, FL 33180**

21 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Mark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/99
Date

954-966-7879
Daytime Phone #

CR2E034 (11/98)

0292403