2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
05-03-2001 90990 030 ***150.00

DOCUMENT # G16840

1. Entity Name
SOUTHERN DESIGN WORKS, INC

Principal Place of Business	Mailing Address
12300 SW 132 COURT MIAMI, FL 33186	C/O RONNI SHAPIRO 1541 BRICKELL AVE APT 1504 MIAMI, FL 33129

C0058942

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE
59-2241253

4. FEI Number [redacted] ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
SHAPIRO, RONNI
1541 BRICKELL AVE, APT 1504
MIAMI, FLORIDA 33129

7. Name and Address of New Registered Agent
Name: SHAPIRO, RONNI
Street Address (P.O. Box Number is Not Acceptable): 1541 BRICKELL AVE, APT 1504
City: MIAMI FL Zip Code: 33129

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.

SIGNATURE [signature] DATE 4/01/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PS NAME: SHAPIRO, RONNI STREET ADDRESS: 12300 S.W. 132 COURT CITY-ST-ZIP: MIAMI, FL 33186	☐ Delete	TITLE: PS NAME: SHAPIRO, RONNI STREET ADDRESS: 1541 BRICKELL AVE, APT 1504 CITY-ST-ZIP: MIAMI, FL 33129	☑ Change ☐ Addition
TITLE: VP NAME: SHAPIRO, JEREMY STREET ADDRESS: 12300 S.W. 132 COURT CITY-ST-ZIP: MIAMI, FL 33186	☐ Delete	TITLE: V.P. NAME: SHAPIRO, JEREMY STREET ADDRESS: 1541 BRICKELL AVE, APT 1504 CITY-ST-ZIP: MIAMI, FL 33129	☑ Change ☐ Addition
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CR2E034 (11/00)

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] RONNI SHAPIRO PRES 4/1/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #