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FILED

Jan 27, 1999 8:00am
Secretary of State

01-27-1999 90030 004 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # H30097

1. Corporation Name

BLAIR DESIGNS, INC.

Principal Place of Business

2121 NL OCEAN BLVD #807 W
BOCA RATON FL 33431

Mailing Address

2121 NL OCEAN BLVD #807 W
BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/13/1984

4. FEI Number

59-2463221

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEVENSTEIN, RICHARD H.

1650 S. DIXIE HWY

SUITE 111-C

BOCA RATON FL 33432

81 Name

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

83

84 City

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

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 DP
STREET ADDRESS SILVERN, VIOLET
CITY-ST-ZIP 2121 N. OCEAN BLVD #807W
BOCA RATON FL

TITLE ☐ DELETE

NAME D
STREET ADDRESS TANGORRA, BARBARA
CITY-ST-ZIP 5 VIDONI PL
HUNTINGTON, LI

TITLE ☐ DELETE

NAME LEVENSTEIN, RICHARD H.
STREET ADDRESS 1650 S. DIXIE HWY
CITY-ST-ZIP SUITE 111-C
BOCA RATON FL

TITLE ☐ DELETE

NAME SILVERN, VIOLET
STREET ADDRESS 2121 N. OCEAN BLVD #807W
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME SILVERN, VIOLET
STREET ADDRESS 2121 N. OCEAN BLVD #807W
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME SILVERN, VIOLET
STREET ADDRESS 2121 N. OCEAN BLVD #807W
CITY-ST-ZIP BOCA RATON FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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: SILVERN, VIOLET

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/99

561-368-8561

Date

Daytime Phone #

CR2E034 (11/98)