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Feb 07 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L60432 (6)

1. Corporation Name
BERLIN DESIGNS, INC.



Principal Place of Business
3043 HARRISON ST
HOLLYWOOD FL 33020
US

Mailing Address
2043 HARRISON ST
HOLLYWOOD FL 33020-3018
US

3. Date Incorporated or Qualified 03/22/1990
3a. Date of Last Report 04/12/1996

2. Principal Place of Business
21 18506 NE 5th AVE
Suite, Apt #, etc.

2a. Mailing Address
26 3511 Greenleaf Circle
Suite, Apt #, etc.

4. FEI Number 65-0181865
Applied For Not Applicable

22 City & State MIAMI, FL

27 City & State Hollywood, FL

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

23 Zip 33179 Country US

28 Zip 33021 Country US

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERLIN, CHARLES D
2043 HARRISON ST
HOLLYWOOD FL 33020

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 3511 Greenleaf Circle
83
84 City Hollywood FL 85 Zip Code 33021

11. Pursuant to the provisions of Sections 607.0502 and 607.1008, 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 *Charles D Berlin, VP* CHARLES D BERLIN, VP 1/31/97
Signature: Typed or printed name of registered agent and file #, applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PSD	<input type="checkbox"/> DELETE
NAME	BERLIN, DALIA	
STREET ADDRESS	3511 GREENLEAF CIR	
CITY - ST - ZIP	HOLLYWOOD FL	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	BERLIN, CHARLES D.	
STREET ADDRESS	3511 GREENLEAF CIR	
CITY - ST - ZIP	HOLLYWOOD FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: *Charles D Berlin, VP* Charles D Berlin, VP 1/31/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 954-966-2736

CR2E034 (9/96)