

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90474 050 ***150.00

DOCUMENT # L84791

1. Entity Name
MORALES DESIGN STUDIO INC.



Principal Place of Business

**5703 RED BUG ROAD
#244**

WINTER SPRINGS, FL 32708

*1555 Sugarwood Circle
Winter Park, FL 32792*

**5703 RED BUG ROAD
#244**

WINTER SPRINGS, FL 32708

US

94065679



02092004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3020874

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MORALES, TAMI N.

**5703 RED BUG LANE #244
WINTER SPRINGS, FL 32708**

*1555 Sugarwood Cir.
Winter Park, FL
32792*

**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 ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVS
MORALES, TAMI
5703 RED BUG ROAD #244
WINTER SPRINGS, FL 32708**

*1555 Sugarwood Cir.
Winter Park, FL 32792*

TITLE
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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:

Tami Morales

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TAMI MORALES

PRES. 4/22/04

Date

Daytime Phone #

*407-312-
6622*