

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L90859

FILED
Jan 21, 2005
Secretary of State

Entity Name: STYLUS DESIGN GROUP, INC.

Current Principal Place of Business:

2699 COLLINS AVE.
SUITE 128
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

14219 SW 97 TERRACE
MIAMI, FL 33186 US

Current Mailing Address:

5333 COLLINS AVE PH 8
MIAMI BEACH, FL 33140

New Mailing Address:

14219 SW 97 TERRACE
MIAMI, FL 33186

FEI Number: 65-0210595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, MARIA AMALIA
5333 COLLINS AVE PH 8
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

LOPEZ, MARIA AMALIA
14219 SW 97 TERRACE
MIAMI, FL 33186 US

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: _____

Electronic Signature of Registered Agent

01/21/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOPEZ, MARIA AMALIA,
Address: 5333 COLLINS AVE PH8
City-St-Zip: MIAMI BEACH, FL 33140

Title: S () Delete
Name: LOPEZ, VERONICA M
Address: 5333 COLINS AVE PH8
City-St-Zip: MIAMI BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOPEZ, MARIA AMALIA,
Address: 14219 SW 97 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: S (X) Change () Addition
Name: SARMIENTO, VERONICA M
Address: 12368 SW 125 TERRACE
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA AMALIA LOPEZ

PD

01/21/2005

Electronic Signature of Signing Officer or Director

Date