

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M85529

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** MAC DESIGN SOLUTIONS, INC.

**Current Principal Place of Business:**

656 KINGFISH PLACE  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

656 KINGFISH PLACE  
NORTH PALM BEACH, FL 33408 US

**New Mailing Address:**

**FEI Number:** 65-0061041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MACDONALD, SCOTT R PD  
656 KINGFISH PLACE  
NORTH PALM BEACH, FL 33408 US

**Name and Address of New Registered Agent:**

MACDONALD, SCOTT R  
656 KINGFISH PLACE  
NORTH PALM BEACH, FL 33408 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: SCOTT R MACDONALD

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MACDONALD, SCOTT R  
Address: 656 KINGFISH PLACE  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

I hereby 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 all other like empowered.

SIGNATURE: SCOTT R MACDONALD

PD

04/29/2011

Electronic Signature of Signing Officer or Director

Date