




2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 20, 2006 8:00 am
Secretary of State

03-21-2006 90022 008 ***150.00

DOCUMENT # M86524			
1. Entity Name DESIGNER DISCOUNT FABRICS, INC.			
Principal Place of Business 1206-B STIRLING ROAD DANIA, FL 33004		Mailing Address 1206-B STIRLING ROAD DANIA, FL 33004	
2. Principal Place of Business 1206-1C Stirling Road		3. Mailing Address 1206-1C Stirling Road	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Dania Beach, FL 33004		City & State Dania Beach, FL 33004	
Zip		Zip	
Country		Country	
4. FEI Number 65-0065571		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WEISER, ROBERT D 2545 JARDIN LN WESTIN, FL 33327		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		Zip Code	
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 		DATE 3-28-06	
SIGNATURE (Typed or printed name of registered agent and one of its officers)		DATE	
9. FILE NOW! FEE IS \$150.00 After May 1, 2008 Fee will be \$850.00		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS			
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PO	WEISER, ROBERT D	2545 JARDIN LN	WESTON, FL 33327
<input type="checkbox"/> Delete			
VD	WEISER, RITA E	2545 JARDIN LN	WESTON, FL 33327
<input type="checkbox"/> Delete			
STD	WEISER, ROBERT	2545 JARDIN LN	WESTIN, FL 33327
<input type="checkbox"/> Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 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 affidavit, with a notarial seal empowered.			
SIGNATURE: 		Date	
SIGNATURE (Typed or printed name of signing officer or director)		Date	

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