

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000004619

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: DESIGN & PLANNING CONSULTANTS, INC.

## Current Principal Place of Business:

21 SW 33 AVE  
MIAMI, FL 33135 US

## New Principal Place of Business:

## Current Mailing Address:

3845 SW 1 STREET  
MIAMI, FL 33134 US

## New Mailing Address:

FEI Number: 59-3628660

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANCHEZ, ALFREDO  
5200 SW 8TH STREET  
MIAMI, FL 33134 US

## Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DE LA ROZA, ROSA A  
Address: 3845 SW 1ST  
City-St-Zip: MIAMI, FL 33134

Title: VP ( ) Delete  
Name: PUENTES, RITA C  
Address: 21 SW 33 AVE  
City-St-Zip: MIAMI, FL 33135

Title: S ( ) Delete  
Name: PUENTES, ADRIANA C  
Address: 21 SW 33 AVE  
City-St-Zip: MIAMI, FL 33135

Title: T ( ) Delete  
Name: PUENTES, LORENZO A  
Address: 21 SW 33 AVE  
City-St-Zip: MIAMI, FL 33135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: PUENTES, ADRIANA C  
Address: 3845 SW 1ST  
City-St-Zip: MIAMI, FL 33134

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: PUENTES, RITA M  
Address: 21 SW 33 AVE  
City-St-Zip: MIAMI, FL 33135

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ADRIANA C. PUENTES

PD

04/25/2007

Electronic Signature of Signing Officer or Director

Date