

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000016254

FILED
Apr 29, 2005
Secretary of State

Entity Name: DRAPED IN DRAPES, INC.

Current Principal Place of Business:

8550 NW 56 STREET
MIAMI, FL 33166 US

New Principal Place of Business:

9880 NW 77 AVENUE
HIALEAH GARDENS, FL 33016 US

Current Mailing Address:

8550 NW 56 STREET
MIAMI, FL 33166 US

New Mailing Address:

9880 NW 77 AVENUE
HIALEAH GARDENS, FL 33016 US

FEI Number: 59-3625518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, PATRICIA STD
3420 SW 124 COURT
MIAMI, FL 33175 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: VALDES, YURI
Address: 3420 SW 124 COURT
City-St-Zip: MIAMI, FL 33175

Title: STD () Delete
Name: RODRIGUEZ, PATRICIA
Address: 3420 SW 124 COURT
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: PATRICIA RODRIGUEZ

STD

04/29/2005

Electronic Signature of Signing Officer or Director

Date