

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90044 028 ***150.00

DOCUMENT # P00000022929	
1. Entity Name DESIGN & CONCEPT BY CAD, INC.	

DO NOT WRITE IN THIS SPACE

90100572

2. Principal Place of Business 519 SW 8th Street Suite, Apt. #, etc.	3. Mailing Address 519 SW 8th Street Suite, Apt. #, etc.
City & State Fort Lauderdale, FL Zip 33315 Country	City & State Fort Lauderdale, FL Zip 33315 Country

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DO NOT WRITE IN THIS SPACE	4. FEI Number 65-0984294	☐ Additional Fee Required \$8.75
	5. Certificate of Status Desired ☐ Additional Fee Required \$8.75	
	7. Name and Address of Current Registered Agent	
	Name Doucet, Bruno Street Address (P.O. Box Number is Not Acceptable) 519 SW 8th Street City Fort Lauderdale FL Zip Code 33315	

8: The above named entity submits this statement for the purpose of charging its registered office or registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent.

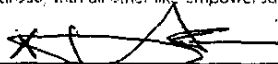
SIGNATURE _____ (NOTE: Registered Agent Signature Required When Is Noting)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			
TITLE PSTD NAME Doucet, Bruno STREET ADDRESS 519 SW 8th Street CITY-ST-ZIP Fort Lauderdale, FL 33315	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
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12: I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  **04/17/03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR