2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 18, 2005 08:00 AN **DOCUMENT # P00000090818** Secretary of State 1. Entity Name DANARILY DESIGN, INC. Principal Place of Business Mailing Address 2885 BEGONIA WAY 2885 BEGONIA WAY COOPER CITY, FL. 33026 COOPER CITY, FL 33026 TO THE STATE OF TH 05152005 No Cho-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1059729 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MILLER, JON S DO NOT WRITE 2885 BEGONIA WAY COOPER CITY, FL 33026 IN THIS SPACE 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. U00000367560 05/18/05-80007-017 15D.BD SIGNATURE. Stanature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution, Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 10. OFFICERS AND DIRECTORS TITLE NAME MILLER, JON S STREET ADDRESS 2885 BEGONIA WAY CITY-ST-ZIP COOPER CITY, FL 33026 7171E D MAME MILLER, MERYL STREET ADDRESS 2885 BEGONIA WAY CITY-ST-ZEP COOPER CITY, FL 33026 TITLE MAKE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NALS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 eath; that I am an efficier 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 Block 11 if

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: Jon S. Miller