DOCUI	MENT#POOD	00097			
PARTY Designers, Inc.				FILED FILED FOR STATE	
Principal Place of Business Mailing Address					02 JAN 14 AM 11:57
7205 NW 12 ST					
· <del>-</del>	, FLORIDA, 3312	.6			
2. Principal Pl	lace of Business	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE
City & State		City & State			4. FEI Number Applied For Not Applied For Not Applicable
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired
	6. Name and Address of Current	Registered Agent		Name	7. Name and Address of New Registered Agent
Secura, MARDOLY 7205 NW 12 ST/ HIAHI, FLORIDA, 33126/					ess (P.O. Box Number is Not Acceptable)
B. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  SIGNATURE  Signature, typed or printed name of registered agent and the fi applicable.  (NOTE: Registered Agent signature required when reinstating)  PATE  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so.  (See criteria on back)    Make Check Payable to Department of State					
11.	OFFICERS AND		12.	operationit of	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	D HORNANDEZ, Sere 7205 NW 12 ST HIGHI FLA 33126	Delete Delete	TITL NAM STR		400004793894 - Addition -01/24/0201026010 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Segura Mardo 7205 NW 125T HIAHI FLA 33126	□ Delete			☐ Change ☐ Addition
ITLE NAME STREET ADORESS CITY-ST-ZIP	SORRAND YANG	∪ Y			☐ Change ☐ Addition
itle Name Street address City-St-Zip		☐ Delete			☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i></i>	□ Derlete			☐ Change ☐ Addition
13. 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.					

1-10-02 305/93701/
Date Daytime Phone #

2001/NIFORM BUSINESS REPORT (UBR)

SIGNATURE: \_\*

## PARTY DESIGNERS, INC.

7205 N.W. 12 STREET MIAMI~ FLORIDA~ 33126 PHONE (305) 593~7011

JANUARY 8, 2002

DEPARTMENT OF STATE

REF: DOCUMENT # P00000097476

THIS NOTE IS TO INFORM THAT DUE TO THE FLOOD THE LAST YEAR THE ROOM WHERE IS THE OFFICE HAVE SERIOUS DAMAGE AND AS YOU IMAGINE THE MATERIAL THAT I WORK WITH MUST BE FREE OF ALL DUST OR CORROSION, FOR THIS REASON I HAVE TO MOVE INMEDIATELLY, MAKE A LOT OF CLAIMS TO MY PROVIDERS TO EXCHANGE MATERIALS AND TRY TO AT LEAST KEEP IN BUSSINES, DOING ALL THIS AND TRYING TO SURVIVE WITH THE COMPETENCE TO THIS NEW ADDRESS AND I FORGOT TO INFORM TO YOUR DEPARTMENT OF THIS CHANGE OF ADDRESS.

TODAY I WENT TO THE BANK TO FILE AN APPLICATION FOR A LOAN AND THEY SHOW ME THAT THE CORPORATION WAS NOT RENEWED.

THIS HAPPENS BECAUSE I DIDN'T RECEIVE ANY INFORMATION AND IS BECAUSE I NEVER INFORM TO YOU ABOUT THE MOVING.

NOW IN THE BANK THEY EXPLAIN TO MY THE PROCEDURE AND TIME TO PAY THAT MUST BE BEFORE APRIL.

AND NOW THEY INFORM TO ME ALSO THAT THE FORMS TO PAY THIS YEAR WAS MAIL ALL READY.

I GET ONE FROM THE INTERNET AND IS INCLUDED WITH THIS LETTER

PLEASE ACCEPT MY PAYMENT AND LATENESS.

THANKS FOR YOUR HELP.

MARDOLY SEGURA PRESIDENT