

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000107794

FILED  
Aug 25, 2008  
Secretary of State

Entity Name: ONE OF A KIND PARTY DESIGN, INC.

**Current Principal Place of Business:**

1185 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1185 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33323

**New Mailing Address:**

FEI Number: 65-1060557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRIEDMAN, SUZANNE ESQ.  
KATZ & FRIEDMAN, P.A.  
100 SOUTH PINE ISLAND ROAD SUITE 114  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: BURNS, LISA HOLLY  
Address: 16234 N.W. 1ST STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VPTD ( ) Delete  
Name: KORKA, LUANN GRACE  
Address: 5160 S.W. 89TH TERRACE  
City-St-Zip: COOPER CITY, FL 33328

**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 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: LISA BURNS

PSD

08/25/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date