


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000019800						<div style="font-size: 2em; font-weight: bold; transform: rotate(-5deg);">FILED</div> <div style="font-size: 1.2em;">04 OCT -7 PM 1:45</div> <div style="font-size: 0.8em;">SECRETARY OF STATE TALLAHASSEE, FLORIDA</div>							
1. Entity Name BLINDS & DESIGNS, INC.				Principal Place of Business P.O. BOX 354127 PALM COAST, FL 32135-4127				Mailing Address P.O. BOX 354127 PALM COAST, FL 32135-4127					
2. Principal Place of Business 1310 S. US 1				3. Mailing Address				08262004 Chg-P CR2E034 (10/03) <i>th</i>					
Suite, Apt. #, etc.				Suite, Apt. #, etc.									
City & State Bunnell, Fla.				City & State									
Zip 32110		Country USA		Zip		Country		4. FEI Number 59-3700400		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required								6. Name and Address of Current Registered Agent MARKINNON, RODERICK E PA 3 MARKET PLACE CT PALM COAST, FL 32137					
7. Name and Address of New Registered Agent													
Name <i>Roderick Mackinnon</i>													
Street Address (P.O. Box Number is Not Acceptable) 1310 S. US 1													
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.								SIGNATURE <i>Roderick E Mackinnon</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE	
<div style="border: 2px solid black; border-radius: 15px; padding: 5px; display: inline-block;"> FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004 </div>				9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <div style="text-align: center; font-size: 1.2em;"> 500041667525 10/07/04--01025--008 **550.00 </div>					
10. OFFICERS AND DIRECTORS													
TITLE OP				<input type="checkbox"/> Delete									
NAME MACKINNON, RODERICK E				<input type="checkbox"/> Change <input type="checkbox"/> Addition									
STREET ADDRESS 14 ZACHARIAS PL				CITY - ST - ZIP									
CITY - ST - ZIP PALM COAST, FL 32164													
TITLE V				<input type="checkbox"/> Delete									
NAME MACKINNON, WENDY				<input type="checkbox"/> Change <input type="checkbox"/> Addition									
STREET ADDRESS 14 ZACHARIAS PL				CITY - ST - ZIP									
CITY - ST - ZIP PALM COAST, FL 32137													
TITLE				<input type="checkbox"/> Delete									
NAME				<input type="checkbox"/> Change <input type="checkbox"/> Addition									
STREET ADDRESS				CITY - ST - ZIP									
CITY - ST - ZIP													
TITLE				<input type="checkbox"/> Delete									
NAME				<input type="checkbox"/> Change <input type="checkbox"/> Addition									
STREET ADDRESS				CITY - ST - ZIP									
CITY - ST - ZIP													
TITLE				<input type="checkbox"/> Delete									
NAME				<input type="checkbox"/> Change <input type="checkbox"/> Addition									
STREET ADDRESS				CITY - ST - ZIP									
CITY - ST - ZIP													
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 Block 11 if changed, or on an attachment with an address, with all other like information.													
SIGNATURE: <i>Wendy Mackinnon</i>								9/30/04 3864470235					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>								<small>Date Daytime Phone #</small>					