

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058175

Entity Name: CUQUI'S DESIGNS, INC.

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

1020 MERIDIAN AVE
SUITE #515
MIAMI BEACH, FL 33139

New Principal Place of Business:

3164 NW 72 AVENUE
MIAMI, FL 33122

Current Mailing Address:

1020 MERIDIAN AVE
SUITE #515
MIAMI BEACH, FL 33139

New Mailing Address:

3164 NW 72 AVENUE
MIAMI, FL 33122

FEI Number: 65-1115456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEACH, MARIA IRENE
1020 MERIDIAN AVE SUITE 515
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

LEACH, MARIA IRENE
3164 NW 72 AVENUE
MIAMI, FL 33122 US

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: MARIA IRENE LEACH

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: LEACH, MARIA IRENE
Address: 1020 MERIDIAN AVE SUITE 515
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: LEACH, MARIA IRENE
Address: 3164 NW 72 AVENUE
City-St-Zip: MIAMI, FL 33122

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: MARIA IRENE LEACH

PSD

04/25/2008

Electronic Signature of Signing Officer or Director

Date