

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

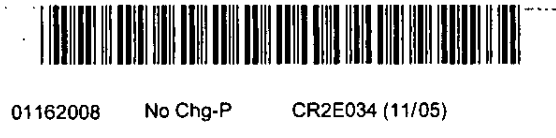
**FILED**  
**Mar 10, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # P01000062617  
 1. Entity Name  
 ANTHONY DESIGNS, INC.



Principal Place of Business: 5923 21ST ST E BRADENTON, FL 34203  
 Mailing Address: P.O. BOX 1629 TALLEVAST, FL 34270

**DO NOT WRITE IN THIS SPACE**



01162008 No Chg-P CR2E034 (11/05)  
 4. FEI Number: 65-1115626 Applied For: Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 IZZO, ANTHONY F  
 5923 21ST ST E  
 BRADENTON, FL 34203

**DO NOT WRITE 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.  
 SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)  
 DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing:  \$5.00 May Be Added to Fees  
 Trust Fund Contribution:

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	IZZO, ANTHONY F
STREET ADDRESS	5923 21ST ST E
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	V
NAME	IZZO, STACEY A
STREET ADDRESS	5923 21ST ST E
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000853556  
 03/26/08-60058-021 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empowered.

SIGNATURE: \_\_\_\_\_  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Date: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_