


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000065884	
1. Entity Name FRENCH DESIGN, INC.	

Principal Place of Business 19100 N BAY ROAD MIAMI BEACH, FL 33160	Mailing Address 700 E DANIA BEACH RD SUITE 202 DANIA, FL 33004
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent VIVIES, PATRICK 700 E DANIA BEACH BLVD STE 202 DANIA, FL 33004	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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P TERZIAN, ERIC 19100 N BAY ROAD MIAMI, FL 33160
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP TERZIAN, ALAIN 19100 N BAY ROAD MIAMI, FL 33160
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HUGON, DAVID 19100 N BAY ROAD MIAMI, FL 33160
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TERZIAN, JEAN-JACQUES 19100 N. BAY RD. MIAMI, FL 33160
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS 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)(f), 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: David Hugon 1/16/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01122004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1118017	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE
IN THIS SPACE

U000000008021
01/20/04-80048-003 150.00

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