

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 AUG 15 AM 11:25



DOCUMENT # P01000072240
1. Entity Name
 DESIRE, INC.

Principal Place of Business
 3318 CLEVELAND ST
 HOLLYWOOD FL 33021

Mailing Address
 3318 CLEVELAND ST
 HOLLYWOOD FL 33021

2. Principal Place of Business
 3318 CLEVELAND ST
 Suite, Apt. #, etc.

3. Mailing Address
 3318 CLEVELAND ST
 Suite, Apt. #, etc.

City & State
 Hollywood FL

City & State
 Hollywood FL

Zip 33021 **Country** USA

REINSTATEMENT 03
 CHECK HERE IF MAKING CHANGES

4. FEI Number 03-0413495 **Applied For**
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 WHITAKER, CECIL ESQ.
 915 MIDDLE RIVER DR STE 600
 FT LAUDERDALE FL 33304

7. Name and Address of New Registered Agent
 Name: _____
 Street Address (P.O. Box Number is Not Acceptable): _____
 City: _____ **FL** Zip Code: _____

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 DAVID A. LINDSEY **DATE** 3/20/03
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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME	DP LINDSEY, DAVIS A 3318 CLEVELAND ST HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	TITLE NAME	LINDSEY, DAVID A. 3318 CLEVELAND ST HOLLYWOOD FL 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	3318 CLEVELAND ST HOLLYWOOD FL 33021		STREET ADDRESS CITY-ST-ZIP	3318 CLEVELAND ST HOLLYWOOD FL 33021	
TITLE NAME	DV LINDSEY, WENDELL 3318 CLEVELAND ST HOLLYWOOD FL 33021	<input checked="" type="checkbox"/> Delete	TITLE NAME	VIOLET JUNE LINDSEY 3318 CLEVELAND ST HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	3318 CLEVELAND ST HOLLYWOOD FL 33021		STREET ADDRESS CITY-ST-ZIP	3318 CLEVELAND ST HOLLYWOOD, FL 33021	
TITLE NAME	DS LINDSEY, VIOLET J 3318 CLEVELAND ST HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	3318 CLEVELAND ST HOLLYWOOD FL 33021		STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete	TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete	TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete	TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP			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)(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 empowered.

SIGNATURE: DAVID A. LINDSEY **DATE:** 3/20/03 **DAYTIME PHONE #:** 954 966 1694
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR