2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000108443

1. Entity Name KJ DESIGNS, INC.



FILED Feb 07, 2008 08:00 Al Secretary of State

Principal Place of Business

5316 SW 33RD TERRACE HOLLYWOOD, FL 33312 Mailing Address

5316 SW 33RD TERRACE HOLLYWOOD, FL 33312



01212008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1154691

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KRAMER, ROBERT M 4000 HOLLYWOOD BLVD., SUITE 485 SOUTH HOLLYWOOD, FL 33021

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	obligations of registered agent.	is purpose or criar	ng no regions as emet or regions on agent, or so	sin, wy mo orace cry torida. Ye	arra c	200ср.
SIGNA			ANOTE D			
	Signature Typed or printed name of registered agent and	ппа и аррисаске	(NOTE, Registered Agent algosture required when reinstating)	DAT	<u> </u>	

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees U00000819112 02/15/08-80070-012 150.00

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10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD SOLODKIN, KIMBERLY JO 5316 SW 33RD TERRACE HOLLYWOOD, FL 33312				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CHY-ST-ZIP	,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N. 17				

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12. Thereby certify that the information supplied with this filling 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 eath; 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 vity an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTID NAME OF SIGNING OFFICER OR DIRECTO

1-21-08

954-873-309

Daylime Phone