2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

Feb 20, 2004 08:00 AM Secretary of State  Frichal Place of Business  Frichal Place of Business  Sure April - enc  Sure April - enc  Sure April - enc  Coy & State  Coy & State  Coy & State  Coy & State  A FEI Number of C4-3594933  Applied For  Applied For  Applied For  Sure April - enc  Coy & State  Coy & State  Coy & State  A FEI Number of C4-3594933  Applied For  NNYAZOF, ISAAK  STATE  NIYAZOF, ISAAK  STATE  Coy & State  A FEI Number of Address of New Registered Agent  NIYAZOF, ISAAK  STATE  NIYAZOF, ISAAK  STATE  State Address of New Registered Agent  File store manifed only a Limited tile statement for the purpose of changing its registered agent, or both, in the State of Roma, in mentalar with, and accept the collaptance of treatment of each purpose of changing its registered agent, or both, in the State of Roma, in mentalar with, and accept the collaptance of treatment of each purpose of changing its registered agent, or both, in the State of Roma, in mentalar with, and accept the collaptance of treatment of each purpose of changing its registered agent, or both, in the State of Roma, in mentalar with, and accept the collaptance of treatment of each purpose of changing its registered agent, or both, in the State of Roma, in mentalar with, and accept the collaptance of treatment of each purpose of changing its registered agent, or both, in the State of Roma, in mentalar with, and accept the collaptance of treatment of the state of changing its registered agent, or both, in the State of Roma, in mentalar with, and accept the mental or accept to the changing its registered agent, or both, in the State of Roma, in mentalar with, and accept the mentalar with and accept the mental or accept to the changing its registered agent, or both, in th	ANNUAL REPORT (AR)					FILED	
Principal Place of Business	1. Entity Name					Feb 20, 2004 08:00 AM	
### Addition And ARCATE ELVO MARGATE ELVO Surfaces  2. Principal Place of Business  Suite, Apt. #. etc.  Suite, Ap	TADESIGN, INC.					·	
### ARGATE FL 3083 ### AFT LAUDEROALE FL 33112  2. Principal Place of Business  Suite, April FL 400.  Suite, A	Principal Plac	ce of Business	Mailing Address	· · ·		†	
Suite Apt #. ctc.  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country			4867 SW 34TH AVE	4867 SW 34TH AVE			
Surie, Apt #, etc.	MARGATE FL 33063 FT LAUDERDALE FL 33312					; IMMARIAMI III MULIU KASI MULIU MULI GARKI MUHUI IIMMI IIMMI MASIM SUULU MULIUN II IMMI	
City & State    City & State   City & State   City & State   A. FEI Number   C4-3594933   Applied for   Mort Applicable   Mort Applicable   Mort Applicable   Mort Applicable   Mort Applicable   Mort Applicable   Sea. 75. Additional for   Mort Applicable	2. Principal Place of Business		3. Mailing Address				
Country   Zip   Country   Zip   Country   S. Certificate of Status Desired   Se. 75. Additional Free National Status Desired Agent   Section 1.	Suite, Apt. #, etc.		Suite, Apt #, etc.			MOORE CR2E034 (11/03)	
So Name and Address of Current Registered Agent  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  8. The Address of P.O. Box Number is Not Acceptable)  1. Only  1. The Address of P.O. Box Number is Not Acceptable  1. Only  1. On	City & State		City & State		<del>- · · · · · · · · · · · · · · · · · · ·</del>	U√3£04033   <del>- </del>	
NIYAZOF, ISAAK 5710 MARGATE FL 33063  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent and rike if accitable in the obligations of registered agent and rike if accitable in the obligations of registered agent and rike if accitable in the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I can familiar with, and accept the obligations of Florida State and Florida. I can familiar with, and accept agent of Florida State familiar with, and accept agent of Florida State familiar with, and accept agent of Can familiar familiar with, and accept agent of Can familiar fami	Zip	Country Zip Co		Count	try	5. Certificate of Status Desired \$8.75 Additional Fee Required	
SITO OFFICERS AND DIRECTORS IN THE NAME STREET ADDRESS OFFI-ST-28P  SITO Delete  MARGATE FL 33063  Street Addresss (P.O. Box Number is Not Acceptable)  City  FL Zip Code  City  FL Zip Code  City  FL Zip Code  City  FL Number is not Acceptable)  City  FL Now, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent are the reportable (NOTE Repower Agent significant required when remaided plant are the fact that the state of Florida Department of State  FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00 May Bo addition of State of Portion Companing Financing and Addition of Portion Remaided State of Portion Companing Financing and Portion Companing Financing F		6. Name and Address of Currer	nt Registered Agent			7. Name and Address of New Registered Agent	
STO MARGATE FL 33063    City   FL   Zip Code	NIY	AZOF ISAAK		1	Name		
E. The above named entity submiss this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    SIGNATURE	571	0			Street Address (	(P.O. Box Number is Not Acceptable)	
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B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    Signature   Properties					City	Zip Code	
SIGNATURE    FILE NOW!!! FEE IS \$150.00   After May 1, 2004 Fee will be \$550.00   Added to Fees						<b>₽₽</b> } '	
FILE NOW!!! FEE IS \$15.0.00 After May 1, 2004 Fee will be \$50,00 Make Check Payable to Florida Department of State:  10. OFFICERS AND DIRECTORS: 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE NOW. STREET ADDRESS OTHY-ST-2P NIVAZOV, NADEZ-HDA STREET ADDRESS OTHY-ST-2P NARGATE FL 33063  TITLE NAME STREET ADDRESS OTHY-ST-2P NAME STREET ADDRESS OTHY-ST-2P STREET	the obligations of registered agent.						
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Daytime Phone #