2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017740

Entity Name: HIGH DESIGN, CORP.

FILED Apr 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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1300 NE MIAMI GARDENS DR 860 NE 175 ST

MIAMI, FL 33162 US SUITE 618 NORTH MIAMI, FL 33179

New Mailing Address: Current Mailing Address:

1300 NE MIAMI GARDENS DR 860 NE 175 ST

SUITE 618 MIAMI, FL 33162 US NORTH MIAMI, FL 33179

FEI Number: 75-3005461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ORTEGA, JUAN M 7510 HARDING AVENUE #5 MIAMI BEACH, FL 33141

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title:

PEIRANO, JUAN C PEIRANO, JUAN C Name: Name: 2540 NE 191 STREET 860 NE 175 ST Address: Address: City-St-Zip: NORTH MIAMI, FL 33188 City-St-Zip: MIAMI, FL 33162

Title: VD Title: VD () Delete (X) Change () Addition

STRONGOLI, ARIEL Name: STRONGOLI, ARIEL Name: 1200 N E MIAMI GARDEN DR & 804 W 2331 NE 135 LANE Address: Address: N MIAMI BEACH, FL 33179 NORTH MIAMI, FL 33181 City-St-Zip: City-St-Zip:

Title:

Title: SD () Delete SD (X) Change () Addition PESADO, MARCELINO D PESADO, MARCELINO D Name: Name:

1300 NE MIAMI GARDENS DR 860 NE 175 ST Address: Address: City-St-Zip: NORTH MIAMI, FL 33179 City-St-Zip: MIAMI, FL 33162

Title: () Delete Title: (X) Change () Addition

STRONGOLI, ANTONIO STRONGOLI, ANTONIO Name: Name: Address: 1200 N E MIAMI GARDEN DR #804 W Address: 2331 NE 135 LANE City-St-Zip: N MIAMI BEACH, FL 33179 City-St-Zip: NORTH MIAMI, FL 33181

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN C PEIRANO PD 04/18/2009