2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P02000019496 FANCY WOOD DESIGN, INC. Principal Place of Business Mailing Address 2380-C NW 21 TERR 2380-C NW 21 TERR MIAMI, FL 33142 MIAMI, FL 33142 01092004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 41-2028642 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SANTOS, DAVID DO NOT WRITE 725 NW 33 AVE MIAMI, FL 33125 IN THIS SPACE 3. 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, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ĎΡ TITLE SANTOS, DAVID MAME STREET ADDRESS 725 NW 33 AVE U00000004863 CITY-ST-ZIP MIAMI, FL 33125 01/15/04-80029-011 150.00 VTSD 73TLE SANTOS, SALVADOR NAME 725 NW 33 AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33125 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MILE NAME STREET ADDRESS

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.

DAVIN SMAYOS

SIGNATURE:

CHY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CHY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

RIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/04

FILED

Jan 15, 2004 08:00 AM

Daytime Phone #