## 2005 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Apr 16, 2005 08:00 AM Secretary of State DOCUMENT # P02000025816 HOT HOUSE OF DESIGN, INC. Principal Place of Business Mailing Address 111 SW 6TH STREET 111 SW 6TH STREET FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301 04142005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 82-0542859 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DE VOSJOLI, CYNTHIA DO NOT WRITE 111 SW 6TH STREET FORT LAUDERDALE, FL 33301 -IN THIS SPACE 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 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 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. DD/T TITLE NAME DE VOSJOLI, CYNTHIA STREET ADDRESS 111 SW 6TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33301 \_\_\_U00000309031 04/16/05-80021-009 150.00 TITLE NAME DE VOSJOLI, CYNTHIA STREET ADDRESS 111 SW 6TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33301 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 I1 if changed, or on an attachment with an address, with all after like empowered.

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR