## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT#** 

1. Entity Name

P02000036415

DESIGNERASSIST, INC.



## FILED Sep 18, 2003 8:00 am Secretary of State

09-18-2003 90032 013 \*\*\*150.00

D	O NOT WRIT	E IN THIS S	SPAC	<b>E</b>				
2. Principal Plac 107	3. Mailing Address 107-B Bob-O-I	Mailing Address 07-B Bob-O-Link Way						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State Naples, FL		City & State Naples, FL			4. FEI Number 03-0418009		Applied For Not Applicable	
Zip Country 34105		Zip 34105	Coun	rtry	5. Certificate of Status Des	Certificate of Status Desired \$8.75 Additional Fee Required		
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	PARTIES NOT W	/DITE		David	Torchin, C.P.A.			
DO NOT WRITE - IN THIS SPACE				Street Address (P.O. Box Number is Not Acceptable) 8211 West Broward Blvd.				
	in itiis si	PACE		Suite	200			
				City Plant	ation	FL	Zip Code 33324	
	amed entity submits this statement	for the purpose of changing	its registere			of Florida. I am fan		
the obligation	ns of registered agen.					علىلم	3	
SIGNATURE	mature, typed or printed tope of regist year age	<u> </u>		hin, C.P.A.		DATE		
, Janu A	gration typed or printed the company of age age age are the first may 1. Fee is \$150.00 are nded UBR is \$61.25 ayable to Florida Department		TOTAL Hagistere	d / gol i signitione required t	9. Election Campai Trust Fund Contr	gn Financing	\$5.00 May Be Added to Fees	
10.		D DIRECTORS	At Min	The state of the state of		Aller of the State		
TITLE	President/Director					or valory for the last of the		
NAME STREET ADDRESS	Belen Moreno		NAMI STRE	E Et address				
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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 on an attachment with an address, with all other life in powered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/15/03

239 6 43 57/

Affachment 80149111 P02000086415

Designerassist, Inc. 107-B Bob-O-Link Way Naples, Florida 34105

July 1, 2003

Dear Sir/Madam:

This is due to the fact that I have moved from Miami to Naples and I therefore have not received the original UBR. Please accept the enclosed check in the amount of \$150 as payment for the current year filing of my company's UBR. Thank you in advance for your understanding in this matter.

Sincerely,

Belen Møréno, President