

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State

08-25-2003 90106 017 ***150.00

0095860 AV

DOCUMENT # P02000081123

1. Entity Name
DESIGNS BY DIMARCO, INC.



Principal Place of Business
**100 SE 6TH AVENUE
DEERFIELD BEACH FL 33441**

Mailing Address
**100 SE 6TH AVENUE
DEERFIELD BEACH FL 33441**



2. Principal Place of Business

3. Mailing Address

3000 N University DR

3000 N. University, FL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE E

STE E

City & State

City & State

Coral Springs, FL

Coral Springs, FL

Zip

Country

Zip

Country

33065

USA

33065

USA

4. FEI Number

90-0054642

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DIMARCO, JANIS M
100 SE 6TH AVENUE
DEERFIELD BEACH FL 33441**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	DIMARCO, JANIS M	
STREET ADDRESS	100 SE 6TH AVENUE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

all to them

M A S
PO BOX 771210
Coral Springs, Fl. 33077-1210
954-346-7288 - Broward 954-346-7217 Fax 305-621-9382 - Dade

86140334
P 02000081123

07/24/03

Florida Department of State
PO BOX 6327
Tallahassee, Fl. 32314

Re: ~~Designs By Dimarco, Inc.~~
Doc # P02000081123

To Whom It May Concern:

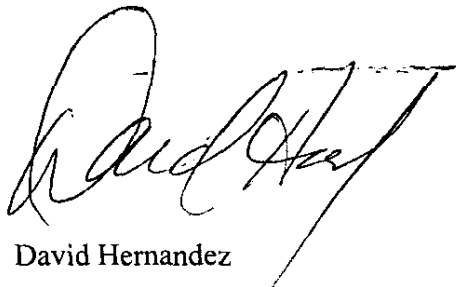
We are enclosing a copy of the application for corporate reinstatement for our client, Designs by Dimarco, Inc.

We are providing a check for the filing and have not included the penalty due to the taxpayer having moved and the forwarding from the postal service had not been forwarded. The second notice was then forwarded by the postal service.

Therefore we are requesting reinstatement on behalf of Designs By Dimarco, Inc. based on change of address and not having received the 2003 UBR form the Department of State.

Should you have any questions, please contact my office.

Thank you,
Sincerely,



David Hernandez