2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005
Secretary of State

DOCUMENT# P02000096391

Entity Name: KOMODO DESIGN, INC.

Current Principal Place of Business:

5792 BIRD RD
S. MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

3411 TOLEDO PLAZA
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 23-0854514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHMIDT, GRETCHEN
3411 TOLEDO PLAZA
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SCHMIDT, ANN
Address: 6974 SW 64 ST.
City-St-Zip: MIAMI, FL 33143

Title: VP ( ) Delete
Name: SCHMIDT, ROBERT
Address: 10140 SW 100 AVE
City-St-Zip: MIAMI, FL 33176

Title: ST ( ) Delete
Name: SCHMIDT, GRETCHEN
Address: 3411 TOLEDO PLAZA
City-St-Zip: CORAL GABLES, FL 33134

Title: VPO ( ) Delete
Name: EPPS, ALICIA
Address: 5792 SW 40 ST.
City-St-Zip: S. MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GRETCHEN SCHMIDT ST 05/02/2005

Electronic Signature of Signing Officer or Director Date