

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000001580

Entity Name: WINSLOW DESIGN GROUP, INC.

FILED
Jan 21, 2005
Secretary of State

Current Principal Place of Business:

8264 NW 68TH ST.
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8264 NW 68TH ST.
MIAMI, FL 33166

New Mailing Address:

FEI Number: 22-3889962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRATS FERNANDEZ & CO
2121 PONCE DE LEON BLVD., STE 240
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAUL, ADOLFO
Address: 16400 COLLINS AVE. APT. 1541
City-St-Zip: SUNNY ISLE BEACH, FL 33160

Title: SD () Delete
Name: SAUL, SEBASTIAN E
Address: 16400 COLLINS AVE. APT. 1541
City-St-Zip: SUNNY ISLE BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAUL, ADOLFO
Address: 8264 NW 68TH STREET
City-St-Zip: MIAMI, FL 33166

Title: SD (X) Change () Addition
Name: SAUL, SEBASTIAN E
Address: 8264 NW 68TH STREET
City-St-Zip: MIAMI, FL 33166

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: SEBASTIAN SAUL

SD

01/21/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date