2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020782

Entity Name: FRANK DESIGN, INC.

SMITH, ANDREW

WESTON, FL 33331

3777 FALCON RIDGE CIRCLE

Name:

Address:

City-St-Zip:

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4040 NE 2ND AVE. STUDIO 401 MIAMI, FL 33137 **Current Mailing Address: New Mailing Address:** 4040 NE 2ND AVE. STUDIO 401 MIAMI, FL 33137 FEI Number: 57-1158949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, ALLEN 200 S. BISCAYNE BLVD. 2500 MIAMI, FL 33131 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HOUSER, TODD Name: Name: 6811 SW 76 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition Name: HENNEY, MICHELE Name: HENNEY, MICHELE 574 NW 159 AVENUE 10640 PARIS STREET Address: Address: PEMBROKE PINES, FL 33028 COOPER CITY, FL 33026 City-St-Zip: City-St-Zip: Title: DIR () Delete Title: () Change () Addition CANTOR, MARK Name: Name: 429 SW 28TH ROAD Address: Address: City-St-Zip: MIAMI, FL 33129 City-St-Zip: Title: DIR () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHELE HENNEY VP 04/20/2006