

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2004 8:00 am
Secretary of State

08-03-2004 90007 028 ***150.00

DOCUMENT # P03000026445

1. Entity Name
IMPROVE BY DESIGN, INC.



Principal Place of Business: **11049 MALAYSIA CIRCLE
BOYNTON BEACH, FL 33437** *US*
Mailing Address: **11049 MALAYSIA CIRCLE
BOYNTON BEACH, FL 33437** *US*

2. Principal Place of Business: **Improve by Design, Inc.
Len Hecker
401 SW 4th Avenue, U#306
Ft. Lauderdale, FL 33315**



07162004 Chg-P CR2E034 (10/03)

City & State: _____ Zip: _____ Country: _____
4. FEI Number: **EN# 04-3324245** Applied For: ☐ Not Applicable
5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent: **HECKER, LEONARD B
11049 MALAYSIA CIRCLE
BOYNTON BEACH, FL 33437** *moved New address*
7. Name and Address of New Registered Agent: **Improve by Design, Inc.
Len Hecker
401 SW 4th Avenue, U#306
Ft. Lauderdale, FL 33315**
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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	TITLE	Improve by Design, Inc.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HECKER, LEONARD B	<i>moved New address</i>	NAME	Len Hecker	
STREET ADDRESS	11049 MALAYSIA CIRCLE		STREET ADDRESS	401 SW 4th Avenue, U#306	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437		CITY-ST-ZIP	Ft. Lauderdale, FL 33315	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: **Leonard B. Hecker, Pres.** **LEONARD B. HECKER** 7/27/04 954-522-3303
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Improve by Design, Inc.
Len Hecker
401 SW 4th Avenue, U#306
Ft. Lauderdale, FL 33315

Attached
240M923
Tel # 954-522-3303

1/27/04

att: Tyrone Scott
Document Specialist
Florida Department of State
Divisions of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500.

Re: Reference # P03000026445

Dear Mr. Scott,

I am enclosing a check for 150.00 for annual report.
I never received any notice for payment
for the year 2004. My company is only incorporated
for one year. No letter or card was received.
Please note above change of address.

Sincerely

Leonard B. Hecker, Pres. of
Improve By Design, Inc.