2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028902

Entity Name: FIGMENT DESIGN, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8953 NW 23RD STREET 2977 MCFARLANE RD DORAL, FL 33172 2ND FLOOR

MIAMI, FL 33133

Current Mailing Address: New Mailing Address:

8953 NW 23RD STREET 2977 MCFARLANE RD DORAL, FL 33172 2ND FLOOR MIAMI, FL 33133

FEI Number: 33-1050422 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:

SYGMAN, FORREST 8603 SO. DIXIE HIGHWAY SUITE 303 MIAMI, FL 33172 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: PD () Delete Title: PD (X) Change () Addition

Name: PANKEY, JEFFREY Name: PANKEY, JEFFREY
Address: 8953 NW 23RD STREET Address: 2977 MCFARLANE RD, 2ND FLOOR

City-St-Zip: DORAL, FL 33172 City-St-Zip: MIAMI, FL 33133

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: DE LEON, MARIO Name: LEON, MARIO

Address: 8953 NW 23RD STREET Address: 2977 MCFARLANE RD, 2ND FLOOR

City-St-Zip: DORAL, FL 33172 City-St-Zip: MIAMI, FL 33133

Title: SD () Delete Title: SD (X) Change () Addition Name: DEL VALLE, NATASHA Name: DEL VALLE, NATASHA

Address: 8953 NW 23RD STREET Address: 2977 MCFARLANE RD, 2ND FLOOR

City-St-Zip: DORAL, FL 33172 City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: JP PD 04/23/2009