

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054461

Entity Name: BLOOMMIAMI DESIGNS, INC.

FILED  
Jan 05, 2007  
Secretary of State

## Current Principal Place of Business:

4141 NE 2ND AVE  
SUITE 101A  
MIAMI, FL 33137

## New Principal Place of Business:

180 NE 39TH ST  
SUITE 223  
MIAMI, FL 33137

## Current Mailing Address:

4141 NE 2ND AVE  
SUITE 101A  
MIAMI, FL 33137

## New Mailing Address:

180 NE 39TH ST  
SUITE 223  
MIAMI, FL 33137

FEI Number: 81-0614981

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DARIN, HELD  
4141 NE 2ND AVE  
101A  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

DARIN, HELD  
180 NE 39TH ST  
SUITE 223  
MIAMI, FL 33137 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: D HELD

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: AYONA, ROBERT  
Address: 4141 NE 2ND AVENUE, SUITE 101A  
City-St-Zip: MIAMI, FL 33137

Title: V ( ) Delete  
Name: HELD, DARIN  
Address: 4141 NE 2ND AVENUE, SUITE 101 A  
City-St-Zip: MIAMI, FL 33137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: AYONA, ROBERT  
Address: 180 NE 39TH ST, SUITE 223  
City-St-Zip: MIAMI, FL 33137

Title: V (X) Change ( ) Addition  
Name: HELD, DARIN  
Address: 180 NE 39TH ST, SUITE 223  
City-St-Zip: MIAMI, FL 33137

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.

SIGNATURE: ROBERT AYONA

P

01/05/2007

Electronic Signature of Signing Officer or Director

Date