

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 08, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000073523

1. Entity Name
FAVORS BY DESIGN, INC.



Principal Place of Business
3326 DEL PRADO BLVD. S
CAPE CORAL, FL 33904

Mailing Address
3326 DEL PRADO BLVD. S
CAPE CORAL, FL 33904



01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 61-1452827	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

STEINBERG, DORAL J
625 SE 14TH TERRACE
CAPE CORAL, FL 33990

**DO NOT WRITE
IN THIS SPACE**

7. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P,D
NAME	STEINBERG, DORAL J
STREET ADDRESS	625 SE 14TH TERRACE
CITY-ST-ZIP	CAPE CORAL, FL 33990

TITLE	VP,D
NAME	MARTIN, DAWN M
STREET ADDRESS	4540 SE 10TH PLACE
CITY-ST-ZIP	CAPE CORAL, FL 33904

TITLE	S
NAME	STEINBERG, DORAL J
STREET ADDRESS	625 SE 14TH TERRACE
CITY-ST-ZIP	CAPE CORAL, FL 33990

TITLE	T
NAME	MARTIN, DAWN M
STREET ADDRESS	4540 SE 10TH PLACE
CITY-ST-ZIP	CAPE CORAL, FL 33904

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/08/05-80085-017 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Dawn M. Martin Dawn M. Martin 4-5-05 239-548-5695
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #