

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073989

FILED
Feb 12, 2008
Secretary of State

Entity Name: PRO DESIGN OF JACKSONVILLE INC.

Current Principal Place of Business:

2529 CORTEZ ROAD
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

2529 CORTEZ ROAD
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 73-1673225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATEV, NIKOLAY JR
2529 CORTEZ RD
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

MATEV, NIKOLAY N JR
2529 CORTEZ RD
JACKSONVILLE, FL 32246 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: NIKOLAY MATEV

02/12/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MATEV, NIKOLAY JR
Address: 2529 CORTEZ RD
City-St-Zip: JACKSONVILLE, FL 32246

Title: S () Delete
Name: MATEV, NIKOLAY SR
Address: 2529 CORTEZ RD
City-St-Zip: JACKSONVILLE, FL 32246

Title: V (X) Delete
Name: MATEV, CHAISE V
Address: 14240 SEA EAGLE DRIVE
City-St-Zip: JACKSONVILLE, FL 32226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MATEV, NIKOLAY N JR
Address: 2529 CORTEZ RD
City-St-Zip: JACKSONVILLE, FL 32246

Title: V (X) Change () Addition
Name: MATEV, CHAISE V
Address: 14240 SEA EAGLE DRIVE
City-St-Zip: JACKSONVILLE, FL 32226

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NIKOLAY MATEV

P

02/12/2008

Electronic Signature of Signing Officer or Director

Date