

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081029

Entity Name: DESIGNER SURFACES, INC.

FILED
Feb 21, 2007
Secretary of State

Current Principal Place of Business:

315 W. GRANT STREET
UNIT B
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

315 W. GRANT STREET
UNIT B
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 27-0064172

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RASH, TIFFANY
315 W. GRANT STREET
UNIT B
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: RASH, TIFFANY
Address: 315 W. GRANT STREET
City-St-Zip: ORLANDO, FL 32806

Title: VP () Delete
Name: RASH, TROY
Address: 315 W. GRANT STREET
City-St-Zip: ORLANDO, FL 32806

Title: S, T () Delete
Name: SCHROEDER, EDWIN
Address: 315 W. GRANT STREET
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RASH, TIFFANY
Address: 315 W. GRANT STREET, UNIT B
City-St-Zip: ORLANDO, FL 32806

Title: VP (X) Change () Addition
Name: RASH, TROY
Address: 315 W. GRANT STREET, UNIT B
City-St-Zip: ORLANDO, FL 32806

Title: S, T (X) Change () Addition
Name: SCHROEDER, EDWIN
Address: 315 W. GRANT STREET, UNIT B
City-St-Zip: ORLANDO, FL 32806

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: TIFFANY J. RASH

P

02/21/2007

Electronic Signature of Signing Officer or Director

Date