

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133658

**FILED**  
**Mar 02, 2005**  
**Secretary of State**

**Entity Name:** LUISHA DESIGNS INC.

**Current Principal Place of Business:**

5584 AINSLEY CT  
BOYNTON BCH, FL 33437

**New Principal Place of Business:**

1619 SW WENDE LANE  
PORT ST. LUCIE, FL 34984

**Current Mailing Address:**

5584 AINSLEY CT  
BOYNTON BCH, FL 33437

**New Mailing Address:**

1619 SW WENDE LANE  
PORT ST. LUCIE, FL 34984

**FEI Number:** 20-0408174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUDES, ELISHA L  
5584 AINSLEY CT  
BOYNTON BCH, FL 33437 US

**Name and Address of New Registered Agent:**

HUDES, ELISHA L  
1619 SW WENDE LANE  
PORT ST. LUCIE, FL 34984 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: ELISHA HUDES

03/02/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: HUDES, ELISHA L  
Address: 5584 AINSLEY CT  
City-St-Zip: BOYNTON BCH, FL 33437

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: HUDES, ELISHA L  
Address: 1619 SW WENDE LANE  
City-St-Zip: PORT ST. LUCIE, FL 34984

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELISHA HUDES

DP

03/02/2005

Electronic Signature of Signing Officer or Director

Date