2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070748

Entity Name: LINGNI DESIGNER CORP

FILED Jan 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2750 NW 44TH ST 2750 NW 44TH ST

405 815

OAKLAND PARK, FL 33309 OAKLAND PARK, FL 33309

Current Mailing Address: New Mailing Address:

2750 NW 44TH ST 2750 NW 44TH ST

OAKLAND PARK, FL 33309 OAKLAND PARK, FL 33309

FEI Number: 20-1066267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RAMONES, LINGNI 2750 NW 44TH ST 2750 NW 44TH ST

405

OAKLAND PARK, FL 33309 US OAKLAND PARK, FL 33309 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: 01/23/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D () Delete Title: P,D (X) Change () Addition

 Name:
 RAMONES, LINGNI
 Name:
 RAMONES, LINGNI

 Address:
 2750 NW 44TH ST APT 405
 Address:
 2750 NW 44TH ST APT 815

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:
 OAKLAND PARK, FL 33309

Title: VP,D () Delete Title: VP,D (X) Change () Addition Name: NIETO, ALEJANDRO Name: NIETO, ALEJANDRO

 Address:
 2750 NW 44TH ST APT 405
 Address:
 2750 NW 44TH ST APT 815

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:
 OAKLAND PARK, FL 33309

Title: S,D () Delete Title: S,D (X) Change () Addition

 Name:
 MADERA, ALEJANDRA
 Name:
 MADERA, ALEJANDRA

 Address:
 2750 NW 44TH ST APT 405
 Address:
 2750 NW 44TH ST APT 815

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:
 OAKLAND PARK, FL 33309

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: LINGNI RAMONES PD 01/23/2007