


2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000090518		
1. Entity Name D & M DESIGN ENTERPRISES, INC.		

FILED

06 FEB -3 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01252006 REIN-P CR2E098 (11/05)

Principal Place of Business 3522 53RD AVENUE WEST SUITE 132 BRADENTON, FL 34210	Mailing Address P.O. BOX 132 BRADENTON, FL 34210
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2. Principal Place of Business 4501 Manatee Ave W Suite, Apt. #, etc. #146	3. Mailing Address 4501 Manatee Ave W Suite, Apt. #, etc. #146
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City & State Bradenton FL	City & State Bradenton FL	4. FEI Number 56-2481807	Applied For <input type="checkbox"/> Not Applicable
Zip 34209	Country Manatee	Zip 34209	Country Manatee

6. Name and Address of Current Registered Agent BERNTSON, EVAN R 3522 53RD AVENUE WEST SUITE 132 BRADENTON, FL 34210		7. Name and Address of New Registered Agent Name Evan Bernrtson Street Address (P.O. Box Number is Not Acceptable) 4501 Manatee Ave W #146 City Bradenton FL Zip Code 34209	
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8. 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 Evan R Bernrtson (NOTE: Registered Agent signature required when reinstating) DATE 1/30/06

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERNTSON, EVAN R 3113 CORTIZ ROAD, LOT 40 BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4501 Manatee Ave W. #146 Bradenton FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition J06000030481 02/14/06--01022--007 **300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Evan R Bernrtson DATE 1/30/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #