2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000095118

Entity Name: LYDA DESIGNS, INC

FILED May 02, 2007 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:
13205 SW 112	' 137TH. AVE	
MIĀMI, FL	33186	
Current M	lailing Address:	New Mailing Address:
I3205 SW MAMI, FL	⁷ 137TH AVE., SUITE 112 33138	
El Number	: 20-1356779 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	l Address of Current Registered Age	nt: Name and Address of New Registered Agent:
ZACARIAS 13205 SW MIAMI, FL	¹ 137TH AVE., SUITE 112	
	e named entity submits this statement fo e of Florida.	r the purpose of changing its registered office or registered agent, or both
n the State	e of Florida.	r the purpose of changing its registered office or registered agent, or both
n the State	e of Florida.	
n the State SIGNATUI n accordan	e of Florida. RE: Electronic Signature of Registere (ce with s. 607.193(2)(b), F.S., the corporation	ed Agent Date a did not receive the prior notice.
n the State SIGNATUI n accordan Election Cai	e of Florida. RE: Electronic Signature of Registere	ed Agent Date a did not receive the prior notice.
n the State BIGNATUI n accordan Election Car DFFICER: Itle: Jame: Address:	e of Florida. RE: Electronic Signature of Registere ice with s. 607.193(2)(b), F.S., the corporation impaign Financing Trust Fund Contribution (ed Agent Date a did not receive the prior notice.
n the State SIGNATUI n accordan Election Cai	e of Florida. RE: Electronic Signature of Registers ace with s. 607.193(2)(b), F.S., the corporation mpaign Financing Trust Fund Contribution (S AND DIRECTORS: VP () Delete VERONICA, SAYAN 4185 WEST LAKE MARY BLVD	ed Agent Date a did not receive the prior notice. ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title: () Change () Addition Name: Address:

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: VERONICA ZAYAN PD 05/02/2007