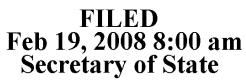
2008 FOR PROFIT CORPORATION

ANNUAL REPORT



| DOCUMENT # P04000135223 1. Entity Name THE DESIGNER SUPPLY.COM, INC. | | | | | 02-19-2008 90030 042 ***150.00 | | | | |
|---|--|--|-----------------------|--|--|--|---|--------------------------------|---|
| Principal Place of Business Mailing Address | | | | | 400 | 20100 | | | |
| 21210 NE 20 AVE | | 21210 NE 20 AVE | | | | | | | |
| MIAMI, FL 33179 US | | MIAMI, FL 33179 US | | | 2.00 Th 44 | | | | |
| | | ř. | | • | | SIII AIGII GATII SAIII SRIA | IA II asa iilda buk a ikada i | IEED IIII | 4 1 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | | | | | |
| | | | | I (USIVAD) IX ORIN BYEN BOTH BOTH OF IN INDIVIDUAL INDI | | | | | |
| Suite, Apl. #, etc. | | Suite, Apt. #, etc. | | | 02112008 | Chg-P | CR2E034 (12 | /06) | |
| City & State | | City & State | | | 4. FEI Number | | | App | lied For |
| | | | | | 65-1234 | 676 | | | Applicable |
| Zip | Country | Zip | Coun | try | 5. Certificate of | of Status Desired | □ \$8.75 Fee Re | | ional |
| | | A Saulatara d A sant | | | 7 Name and | Address of New R | | quireq | |
| | 6. Name and Address of Currer | ii Registerea Agent | | Name /) | 7. Name and | L COLLEGE OF HEW K | egistered Agent | | |
| LAVENDER, JOEL R | | | | | 1 KBAV | Lver_ | | | |
| 507 SE 11 COURT | | | | Street Address | (P.O. Box Numbe | is Not Acceptable | ?) | | |
| | RDAĽĚ, FL 33316 | | | 12 <u>7</u> 21 12 | <u> </u> | . 31 | | | |
| | | | | | | | | | _ |
| | | | | City MIA | m, | | FL 🏻 🍠 | -Sode | 9 |
| 9. The above | named entity submits this statement | for the purpose of changing its | registeri | | | in the State of Flo | | with a | nd accent |
| | ons of Legistered agent. | to the perpose of oranging no | | | | | | | |
| SIGNATURE_ | Signature, typed or printed name of registered age | and talle it applies blog (NOT) | E Doguetora | d Agent signature require | ad when reinstating) | | DATE | | |
| | Signature, typed or printed name or registered age | st and the trappingable. | - negisiere | | | | | | |
| FILI After Ma | E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550 | 9. Election Campa Trust Fund Cont | - | | 5.00 May Be ded to Fees | | | • | |
| 10. | OFFICERS AND DIRECTORS | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | | | |
| TITLE | P | ☐ Delete | TITL | £ | | | ☐ CH | nange | Addition |
| NAME | BOTWINICK, BRUCE | | NAM | _ | | | | | |
| STREET ADDRESS | 21210 NE 20 AVE | | | EET ADDRESS | | | | | |
| CITY-ST-ZIP | MIAMI, FL 33179 | | CITY | - ST-ZIP | | | | | |
| TITLE | SEC | ☐ Delete | IIIL | 1 | | | ☐ CH | nange | Addition |
| NAME | SILVER, WARREN | | NAM | - | | | | | |
| STREET ADDRESS | 21210 NE 20 AVE | | | EET ADDRESS /- ST-ZIP | | | | | |
| CITY-ST-ZIP | MIAMI, FL 33179 | | <u> </u> | | | | | | |
| TITLE | TREA | ☐ Delete | TITE | | | | □ cı | range | Addition |
| NAME STREET ADDRESS | SILVER, WARREN 21210 NE 20 AVE | - | | EET ADDRESS | | | | | |
| CITY-ST-ZIP | MIAMI, FL 33179 | | 1 | r-ST-ZIP | | | | | |
| | TANZIAN, TE SOTTO | ☐ Delete | TITL | | | | | anne | Addition |
| TITLE NAME | ' | □ Delete | NAN | I | | | | nanye | Mudition |
| STREET ADDRESS | 1 | | | EE1 ADDRESS | | | | | |
| CITY-ST-ZIP | | | CITY | Y-ST-ZIP | | | | | |
| DILE | | □ Delete | DIL | .E | | | CI | hange | Addition |
| NAME | | D 5000 | NAN | | | • | | J- | |
| STREET ADDRESS | • > > | | STR | EET ADDRESS | | | | | |
| CITY-ST-ZIP | | | CIT | Y-ST-ZIP | | | _ | | |
| TITLE | - | ☐ Delete | TITE | .E | | | | hange | ☐ Addition |
| NAME | | • - | NAN | AE [| | | | | |
| STREET ADDRESS | | | STR | EE1 ADDRESS | | | | | |
| CATY-ST-ZAP | | | | Y-ST-ZIP | <u></u> | | <u></u> _ | | |
| indicated of the cor | certify that the information supplied videnthis report or suppliemental reportor that receive or Irustee er or on an attachmen with an address | it is true and accurate and that neowered to execute this repor | my signa t as requ | temptions containe ature shall have the sired by Chapter 60 | ed in Chapter 119 e same legal effec 07, Florida Stajute | Florida Statutes. It as if made under s; and that my nam | I further certify tha oath; that I am an ne appears in Bloc | t the in officer k 10 or | lormation or director Block 11 if |