

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 03, 2005 8:00 am
Secretary of State

05-03-2005 90119 012 ***150.00

DOCUMENT # P04000158018															
1. Entity Name DESIGN OF FENCES INC.															
Principal Place of Business 1820 W 53 ST #308 HIALEAH, FL 33012 9695 NW 79 Ave			Mailing Address 1820 W 53 ST #308 HIALEAH, FL 33012												
2. Principal Place of Business 19		3. Mailing Address													
Suite, Apt. #, etc. HIALEAH FLA		Suite, Apt. #, etc. 33012													
City & State		City & State													
Zip		Country		Zip											
Country		Country													
4. FEI Number X 20-1908760															
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required															
6. Name and Address of Current Registered Agent GONZALEZ, GERMAN O 1820 W 53 ST #308 HIALEAH, FL 33012															
7. Name and Address of New Registered Agent															
Name															
Street Address (P.O. Box Number is Not Acceptable)															
City															
State FL Zip Code															
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: DATE: 4/12/05															
(NOTE: Registered Agent signature required when reappointing)															
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00															
9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees															
10. OFFICERS AND DIRECTORS															
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: DATE: 4/12/05															
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR															
305 823 1028															