

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000159190

Entity Name: MSW DESIGN DISTRICT, INC.

**FILED**  
**Jan 26, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

14340 BISCAYNE BLVD  
NORTH MIAMI BEACH, FL 33181

**New Principal Place of Business:**

**Current Mailing Address:**

14340 BISCAYNE BLVD  
NORTH MIAMI BEACH, FL 33181

**New Mailing Address:**

FEI Number: 20-1916121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DADE COUNTY CORPORATE AGENTS, INC.  
18901 NE 29TH AVENUE  
SUITE 100  
AVENTURA, FL 33180 US

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

JACOB, FRANCIS  
14340 BISCAYNE BLVD  
NORTH MIAMI BEACH, FL 33181 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: FRANCIS JACOB

01/26/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JACOB, SARI  
Address: 14340 BISCAYNE BLVD  
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: M  
Name: JACOB, FRANCIS  
Address: 14340 BISCAYNE BLVD  
City-St-Zip: NORTH MIAMI BEACH, FL 33181

I hereby 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 all other like empowered.

SIGNATURE: SARI JACOB

P

01/26/2010

Electronic Signature of Signing Officer or Director

Date