

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000082460

Entity Name: ANL DESIGN GROUP INC

FILED
Nov 08, 2007
Secretary of State

Current Principal Place of Business:

2347 CERBERUS DRIVE
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2044
APOPKA, FL 32704 US

New Mailing Address:

2347 CERBERUS DR
APOPKA, FL 32712 US

FEI Number: 14-1931272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANE, TONY E
2347 CERBERUS DRIVE
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

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: TONY LANE

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LANE, TONY E
Address: 2347 CERBERUS DRIVE
City-St-Zip: APOPKA, FL 32712 US

Title: VP () Delete
Name: LANE, AMIRA N
Address: 2347 CERBERUS DRIVE
City-St-Zip: APOPKA, FL 32712 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TONY LANE

P

11/08/2007

Electronic Signature of Signing Officer or Director

Date