

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000150829

Entity Name: NIA DESIGNS INC.

FILED  
Jan 27, 2009  
Secretary of State

## Current Principal Place of Business:

545 SE 12TH STREET  
# 205  
DANIA, FL 33004 US

## New Principal Place of Business:

785 NATURE'S COVE RD  
DANIA BEACH, FL 33004 US

## Current Mailing Address:

545 SE 12TH STREET  
# 205  
DANIA, FL 33004 US

## New Mailing Address:

785 NATURE'S COVE RD  
DANIA BEACH, FL 33004 US

FEI Number: 20-3776811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEMU, DINIA R  
545 SE 12TH STREET  
# 205  
DANIA, FL 33004 US

## Name and Address of New Registered Agent:

DEMU, DINIA R  
785 NATURE'S COVE RD  
DANIA BEACH, FL 33004 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:

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DEMU, DINIA R  
Address: 545 SE 12TH STREET # 205  
City-St-Zip: DANIA, FL 33004

Title: VP ( ) Delete  
Name: DEMU, ADAM I  
Address: 545 SE 12TH STREET # 205  
City-St-Zip: DANIA, FL 33004

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DEMU, DINIA R  
Address: 785 NATURE'S COVE RD  
City-St-Zip: DANIA BEACH, FL 33004

Title: VP (X) Change ( ) Addition  
Name: DEMU, ADAM I  
Address: 785 NATURE'S COVE RD  
City-St-Zip: DANIA BEACH, FL 33004

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: DINIA DEMU

P

01/27/2009

Electronic Signature of Signing Officer or Director

Date