FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Feb 17 1998 8:00am Sacretary of State

	1998		Secretary of State DIVISION OF CORPORATIONS				Secretary of State						
1. Corporation	MENT # POS Name NATIONAL DESIGN G	5873 ROUP, INC.	(5)					f #8011843 Mil 00181	2 44	ana ala n a a	er bir il birki de	iil Afâll (Ba)	
Principal Place		-	Address				ţ		B.1.61 (211) (246)	1111 -			
3201 GRIFFIN STE 210	RD.	3201 (STE 2	Briffin RD.				- 1						
DANIA FL 333	312		DANIA FL 33312					DO NOT WRITE IN THIS SPACE					
US		บร					3.	Date Incorporated	d or Qualified				7
5 6 6 1 0 1 0 1			A 1-1-					05/02/1985			/ 		_
-	lace of Business	}1	2a. Mailing Address				4-	FEI Number 59-2521916	:	/	, — , —	pplied For	\dashv
Suite, Apt	#, etc		e, Apt. #, etc.				_+_			/		ot Applicable Additional	4
22		27	•				5.	Certificate of Stat	us Desired	₽V		equired	
City & State	9		& State				6.	Election Campaig	n Financing		\$5.00	May Be	7
23		[28]		·				Trust Fund Contri	bution		Added	to Fees	4
Zip	Country	Zip		<u></u>	untry			This corporation of					-
24	25 9. Name and Address o	29 29 Current Registered	Agent	30				Personal Property Name and Addre				_] No	\dashv
GAI	RONER, ROBERT				81	Name							7
)1 GRIFFIN RD.				82	Ctroot Add	drago (D	O. Box Number is	Not Accent	able)	·		4
	E 210					Sireet Aut	uress (r.	O, BOX NUMBER IS	s Not Accepte	abie)			
DAI	NIA FL 33312				83		_						1
					84	City				g g	85 Zip	Code	┪
44 Ourquent I	to the provisions of Sections	607 0602 and 607 15	no Llorido Ctate	dos thos		nomad oa	rnoration	aubmits this state	oment for the	FI		to registered	4
office or re	egistered agent, or both, in t	he State of Florida, Si	ach change was	authorize	ed by	the corpora	ation's b	pard of directors.	I hereby acco	ept the ap	or changing i pointment as	registered	
-	m familiar with, and accept the	ne obligations of, Sec	жоп 607.0505, ғ	iorida Sta	notes.								
SIGNATURE .	Signature, typed or punited name of reg	prieted age at and the if appl	able (NC) 16 Registere	ed Agen	t signature requ	puired when i	reinstating)		DATE			10
12.		ERS AND DIRECTOR		13.			Α	DDITIONS/CHAN	GES TO OFF	ICERS AN			- S
TITLE	CD Gardner, Robert		☐ DELETE	1.1 7		ļ.					Change	Addition	15
NAME STREET ADDRESS	3201 GRIFFIN RD., #2	210		1.2 N		ADDRESS							15
CITY-ST-ZIP	DANIA FL				IIY-SI								ű
TITLE	DPS		DELETE	2.1 T		- 211					Change	Addition	2
NAME	RAYMOND, DAVID			2.2 N	AME	ŀ			. 44				ı
STREET ADDRESS	3201 GRIFFIN RD.			2.3 S	TREET A	NODRESS							
CITY-ST-ZIP	DANIA FL				CITY-SI	·ZIP						·	_
TITLE	d Gardner, Marilyn		DELETE	3.1 7							☐ Change	Addition	
NAME STREET ADDRESS	3201 GRIFFIN RD.			32N		Innaces							1
CITY-ST-ZIP	DANIA FL			4	CITY-ST	DDAESS							
TITLE			DELETE	4.1 1		-20				,	Change	Addition	1
NAME				4 2 1	NAMÉ								ı
STREET ADDRESS				4.3 S	TAEET A	ODRESS							
CITY-ST-ZIP				4.4 C	ITY-ST	ZIP							4
TITLE			∐ DELETE	5.1 T							☐ Change	Addition	1
NAME CIPIET ADDOCCO				5.2 N									
STREET ADDRESS						DDRESS							1
CITY-ST-ZIP TITLE			DELETE	5.4 C	ITY-ST ITLE	ZIP					Change	Addition	1
NAME				6.2 N		l							
\$TREET ADDRESS				635	TREET A	DDRESS							
CITY-ST-ZIP		<u> </u>			ITY-ST								_
14. I hereby of indicated of	ertify that the information sup on this arinual report or supp	oplied with this filing objection of the property of the prope	does not qualify ort is true and ac	for the ex-	empli d that	on stated in I my signat	in Section	119.07(3)(i), Flor have the same le	rida Statutes. egal effect as	I further of	certify that the inder oath: th	information at I am an	
officer or of Block 12 of	on this arinual report or suppli director of the corporation or or Block 13 if chance dy or on	the receiver or truste	e empowered to	execute	this re	eport as rec	quired by	Chapter 607, Flo	orida Statutes	and that	my name ap	pears in	

SIGNATURE:

sonature and typed on printed name of signing officer on director