

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000035472

Entity Name: COMMERCIAL CEILINGS DESIGN, INC.

FILED  
Apr 30, 2008  
Secretary of State

**Current Principal Place of Business:**

1520 N.W. 59TH WAY  
HOLLYWOOD, FL 33024

**New Principal Place of Business:**

1520 N.W. 69TH WAY  
HOLLYWOOD, FL 33024

**Current Mailing Address:**

17290 NE 19TH AVE  
C/O M. ALMAN  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

FEI Number: 84-1705705      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ALMAN, MARTIN  
17290 N.E. 19TH AVENUE  
NORTH MIAMI BEACH, FL 33162      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:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: SAVA, GUY  
Address: 1520 N.W. 59TH WAY  
City-St-Zip: HOLLYWOOD, FL 33024

Title: SD      ( ) Delete  
Name: SAVA, GAIL  
Address: 1520 N.W. 59TH WAY  
City-St-Zip: HOLLYWOOD, FL 33024

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: SAVA, GUY  
Address: 1520 N.W. 69TH WAY  
City-St-Zip: HOLLYWOOD, FL 33024

Title: SD      (X) Change ( ) Addition  
Name: SAVA, GAIL  
Address: 1520 N.W. 69TH WAY  
City-St-Zip: HOLLYWOOD, FL 33024

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: GUY SAVA

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date