

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000076646

FILED  
Apr 28, 2007  
Secretary of State

Entity Name: CAMILLE'S HOME DESIGNS, INC.

## Current Principal Place of Business:

1705 OPA-LOCKA BLVD  
OPA-LOCKA, FL 33054

## New Principal Place of Business:

## Current Mailing Address:

1705 OPA-LOCKA BLVD  
OPA-LOCKA, FL 33054

## New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ISAAC, ICARMELLE  
841 NE 90TH STREET  
2  
MIAMI, FL 33138 US

## Name and Address of New Registered Agent:

ISAAC, ICARMELLE  
1705 OPA-LOCKA BLVD  
OPA-LOCKA, FL 33054 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: ICARMELLE ISAAC

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: ISAAC, ICARMELLE  
Address: 841 NE 90TH STREET  
City-St-Zip: MIAMI, FL 33138

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ISAAC, ICARMELLE  
Address: 1705 OPA-LOCKA BLVD  
City-St-Zip: OPA-LOCKA, FL 33054

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: ICARMELLE ISAAC

P

04/28/2007

Electronic Signature of Signing Officer or Director

Date