2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000081404

RICHARDS, C. ANTHONY

MIAMI GARDENS, FL 33169

19015 NW 8TH AVE

Name: Address:

City-St-Zip:

FILED Jun 21, 2008 Secretary of State

Entity Name: ADONAI'S DIVINE DESIGNS, INC. **Current Principal Place of Business: New Principal Place of Business:** 19015 NW 8TH AVE MIAMI GARDENS, FL 33169 **Current Mailing Address: New Mailing Address:** 19015 NW 8TH AVE MIAMI GARDENS, FL 33169 FEI Number: 26-0560118 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RICHARDS, MICHAEL RICHARDS, MICHAEL 455 NW 100 PLACE 19015 NW 8TH AVE PEMBROKE PINES, FL 33025 US MIAMI GARDENS, FL 33169 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: MICHAEL RICHARDS 06/21/2008 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition RICHARDS, MICHAEL Name: Name: 19015 NW 8TH AVE Address: Address: City-St-Zip: MIAMI GARDENS, FL 33169 City-St-Zip: Title: Title: () Delete () Change () Addition Name: SINCLAIR, SHARON Name: 19015 NW 8TH AVE Address: Address: MIAMI GARDENS, FL 33169 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition SCHLUSSLER, ANJAMETTE Name: Name: 19015 NW 8TH AVE Address: Address: City-St-Zip: MIAMI GARDENS, FL 33169 City-St-Zip: Title: VΡ (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: MICHAEL RICHARDS 06/21/2008