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Aug 06, 2008 8:00 am
Secretary of State

08-06-2008 90018 041 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P07000102369

1. Entity Name
DESIGN PROPERTY MANAGEMENT, INC.

Principal Place of Business	Mailing Address
1497 MAIN STREET SUITE #311 DUNEDIN, FL 34698	1497 MAIN STREET SUITE #311 DUNEDIN, FL 34698

2. Principal Place of Business - No P.O. Box	3. Mailing Address
1199 Lazy Lake Rd W	1497 Main St.
Suite, Apt. #, etc.	Suite, Apt. #, etc. #311
City & State: Dunedin, FL	City & State: Dunedin, FL
Zip: 34698 Country	Zip: 34698 Country: U.S.A

4. FEI Number: 26-1191165 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

7. Name and Address of New Registered Agent

Name: Jessica Wires
Street Address (P.O. Box Numbers Not Acceptable): 1497 Main St #311
City: Dunedin FL Zip Code: 34698

8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE: Jessica Wires 7/31/08
Signature of new registered agent and new registered agent's name, typed or printed — Date

FILE NOW!!! FEE IS $150.00
Due by September 12, 2008

9. Political Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(c), F.S., the corporation did not receive the payment.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WIRES, JESSICA 1497 MAIN STREET #311 DUNEDIN, FL 34698	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jessica Wires 7/31/08 (727)831-2003
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #