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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## Secretary of State 1998 DOCUMENT # 1. Corporation Name P93000032512 (4) ROSENBERG DESIGN GROUP, INC. Principal Place of Business Mailing Address 12901 SW 71ST AVE 12901 SW 71ST AVE MIAMI FL 33156 MIAMI FL 33156 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/04/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0410637 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #. etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. ☐ Yes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SF&F RESIDENT AGENTS INC 200 S BISCAYNE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) 4750 SOUTHEAST BANK BLDG 83 MIAM! FL 33131 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change v/as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

DIGINATURE						
	Signature, typed or printed name of registered agent and title if applicat	ole. (NOTE: R	<u> </u>	required when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D P	DELETE	1.1 TITLE	S/T	☐ Change	X Addition
NAME	ROSENBERG, WILLIAM P		1 2 NAME	LYDIA ROSENBERG		
STREET ADDRESS	12901 SW 71ST AVE		1 3 STREET ADDRESS	12901 SW 71ST AVEN	UE	:
CITY-ST-ZIP	MIAMI FL 33156		1.4 CMY-ST-ZIP	MIAMI, FL 33156		
TITLE		☐ DELETE .	2,1 TITLE	•	Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4,1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5,1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP	•		
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6,2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - 7(P			6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

**FILED** 

Jan 30 1998 8:00am