

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000039556

Entity Name: UNITED DESIGNS, INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

14300 SW 78 AVE.
PALMETTO BAY, FL 33158

New Principal Place of Business:

Current Mailing Address:

14300 SW 78 AVE.
PALMETTO BAY, FL 33158

New Mailing Address:

FEI Number: 65-0415364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOFIELD, NORA
14300 SW 78 AVE.
PALMETTO BAY, FL 33158 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: P () Delete
Name: SCHOFIELD, NORA
Address: 14300 SW 78 AVE.
City-St-Zip: PALMETTO BAY, FL 33158

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NORA SCHOFIELD,
Address: 14300 SW 78 AVE.
City-St-Zip: PALMETTO BAY, FL 33158

Title: PRES () Change (X) Addition
Name: NORA SCHOFIELD,
Address: 14300 SW 78 AVENUE
City-St-Zip: PALMETTO BAY, FL 33158

Title: PRES () Change (X) Addition
Name: NORA SCHOFIELD,
Address: 14300 SW 78 AVENUE
City-St-Zip: PALMETTO BAY, FL 33158

Title: PRE () Change (X) Addition
Name: NORA SCHOFIELD,
Address: 14300 SW 78 AVENUE
City-St-Zip: PALMETTO BAY, FL 33158

Title: PRES () Change (X) Addition
Name: NORA SCHOFIELD,
Address: 14300 SW 78 AVENUE
City-St-Zip: PALMETTO BAY, FL 33158

Title: PRES () Change (X) Addition
Name: NORA SCHOFIELD,
Address: 14300 SW 78 AVENUE
City-St-Zip: PALMETTO BAY, FL 33158

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: NORA SCHOFIELD

PRES

01/28/2009

Electronic Signature of Signing Officer or Director

Date