FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED
95 MAY -1 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000057766 (6)

1. Corporate Name

INTERNATIONAL DESIGNER IMAGES, INC.

Principal Place of Business: 11195 SAND POINT TERRACE, BOCA RATON FL 33428

Mailing Address: 11195 SAND POINT TERRACE, BOCA RATON FL 33428

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/18/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0432824 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21 4251 NW 88th Ave -
Suite, Apt. #, etc.
22 Pine Plaza
City & State
23 Sunrise FLORIDA
Zip
24 33351
Country
25 USA

2a. Mailing Address
26 P.O. Box 450367
Suite, Apt. #, etc.
27
City & State
28 Sunrise Florida
Zip
29 33345-0367
Country
30 USA

9. Name and Address of Current Registered Agent

TAL, DEBORAH
1245 N. W. 25 TERRACE
SUNRISE FL 33323

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL
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 was 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.

SIGNATURE Deborah Tal — DATE 1/16/95

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	TAL, DEBORAH
STREET ADDRESS	1245 NW 125 TERRACE
CITY-ST-ZIP	SUNRISE FL
TITLE	VP
NAME	ROSENRAUCH, ILONA
STREET ADDRESS	11195 SANDPOINT TERRAE
CITY-ST-ZIP	BOCA RATON FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1-1 TITLE		☐ Change ☐ Addition
1-2 NAME		
1-3 STREET ADDRESS		
1-4 CITY-ST-ZIP		
2-1 TITLE		☐ Change ☐ Addition
2-2 NAME		
2-3 STREET ADDRESS		
2-4 CITY-ST-ZIP		
3-1 TITLE		☐ Change ☐ Addition
3-2 NAME		
3-3 STREET ADDRESS		
3-4 CITY-ST-ZIP		
4-1 TITLE		☐ Change ☐ Addition
4-2 NAME		
4-3 STREET ADDRESS		
4-4 CITY-ST-ZIP		
5-1 TITLE		☐ Change ☐ Addition
5-2 NAME		
5-3 STREET ADDRESS		
5-4 CITY-ST-ZIP		
6-1 TITLE		☐ Change ☐ Addition
6-2 NAME		
6-3 STREET ADDRESS		
6-4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemptions stated in Section 119.07(1), 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.

SIGNATURE: Deborah Tal DEBORAH TAL — 1/16/95 — (305) 742-1008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

0265388 CP