SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morlham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000018034 (6)

DESIGNCORP, INC.

Principal Place of Business	Mailing Address	



20341 SW 118 MIAMI FL 331		20341 SW 118TH AVE MIAMI FL 33177						
					d or Qualified	3a. Date of Last Report 03/23/1995		
2. Principal Pi 21 132	ace of Business SW 58 AVE	2a. Mailing Address 26 132 らい ち	8 AVE	03/02/1994 4. FEI Number & E NOT APPL	5-0617 CABLE	3134	Applied F Not Appli	
Suite, Apt. i	#, etc	Suite, Apt #, etc.	· ·	5. Certificate of Stat		1 1 7 -	. 75 Addition ee Required	
	ration, Floriba	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			bution	L A	5.00 May B dded to Fees	s
Zip 24 333	9. Name and Address of Current F	11	Country O S A	This corporation to Florida Statutes Name and Address		Yes No	ders 199 03	32.
МО	RGAN, COURTNEY R	Jose M		-GE				
203	MI SW 118TH AVE	Address (P.O. Box Number is	Not Acceptable	e)				
ITIS	MI (L 55) / /		83					
			B4 \$ 1 p	MOTATION		FL 85	Zip Code 333	7
office or re	to the provisions of Sections 607.0502 a agistered agent, or both, in the State of m familia With, and accept the obligatio	Florida Such change was aut ons of, Section <mark>607,0505, Flori</mark> d	horized by the corp da Statutes.	oration's board of directors.)	ment for the put hereby accept t	rpose of changi the appointmen	ng its registe Las registere	ered ed
SIGNATURE	Signature , ped or protect name of registered agent a	IRESIS	EOT Registered Agent signatura	ragewed when reinstaring)		· 🖟 · · · .	196	
12.	OFFICERS AND D	DIRECTORS	13.	ADDITIONS/CHAN	IGES TO OFFIC	ERS AND DIREC	CTORS IN 12	2 9
TITLE	P	DELETE	11 Tatle			Cn	ange A	Addition
NAME	ROTGER, JOSE M.		1.2 NAME					
STREET ADDRESS	132 SW 58 AVE		1.3 STREET ADDRESS					
CITY-ST-ZIP	PLANTATION FL		14 CITY - ST - ZIP					۶
TITLE	P	DELETE	2) TITLE	P		, Cr	ange A	Addition C
NAME	RODRIGUEZ, JOSE A.		2.2 NAME	ROMRIGUEZ,	JOSE,	4 –		
STREET ADDRESS	3855 SW 88 CT		2 3 STREET ADDRESS	PRODRIGUEZ, 1645 N.W. S MIAMI, FI	SOUTHRI	VER DÆ	? 	j
CITY-ST-ZIP	MIAMI FL		2 4 CITY - ST - ZIP	NTOMAT E	1. 22/	25		
TITLE	P	DELETE	3 1 TITLE	MA HANT I FI	<u> </u>		ange A	Addition
NAME	MORGAN, COURTNEY		3 2 NAME				ange [] n	
STREET ADDRESS	20341 SW 118 AVE		3.3 STHEFT ADDRESS					ì
1	MIAMI FL							
CITY+ST-ZIP TITLE	MINNIEL	DELETE	3.4 CITY - ST - ZIP 4.1 TITLE			11 6	ange A	Addition
		[ange [n	iddition
NAME			. 4 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP		T DELETE	4.4 CITY - ST - ZIP					
TITLE		DELETE	5 1 11TLE				iange A	Addition
NAME			5 2 NAME					
STREET ADDRESS			5 3 STREET AUDRESS					
CITY-ST-ZIP		·	5 4 CHTV - ST - ZIP					
TITLE		DELETE	6 1 TITLE			∐ Cr	nange A	Addition
NAME			6 2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					1
CITY-ST-ZIP			6 4 CITY - ST - ZIP					[
14. I do hereb	by certify that the information supplied w	vith this filing is voluntarily furn-	ished and does not	qualify for the exemption sta	red in Section 11	19.07(3)(k), Flor	da Statutos	1

further certify that the information sopplied with thing is voluntarily unished and does not quality of the exemplor state in section 119.07(a)s, hinded solutions in further certify that the information indicated on this 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or ori an attachment with an address

SIGNATURE

PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

196 (954) 584-8174

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