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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000021174 (5)

1. Corporation		^	(-)				1			
MARY L	OUISE DESIGNS, IN	C.					- [: 21 201 21 01 7 1602 17	##11 @ 1#1 1 ## 1
							j			
Principal Place	e of Business	М	ailing Address	:				1 1861-186 \$10 16 11 161 1 161 1 161 1 161 1 161 1 161 1 1611 1611		ABRI BIDI KRDI
6016 LEONARDO STREET 6016 LEONARDO STERET							1			
CORAL GABLES FL 33146 CORAL GABLES FL 33146					-			DO NOT WRITE IN THIS SPACE		
US US				•				3. Date Incorporated or Qualified		
								03/09/1994		
2. Principal Place of Business			Mailing Address					4. FEI Number	F	Applied For
21			26					65-0504485	1	Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	T	Additional	
City & State			City & State				O Planta O Company Manager		Required	
23	5	28	28					6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip Country			Zip Cou			intry		8. This corporation owes or has paid the		-
24	25 29		30					Personal Property Tax due June 30. Yes No		
	9. Name and Address of	f Current Regis	tered Agent		81	Name		10. Name and Address of New Register	ed Agent	
	JNG, MARY LOU NIMER				81	Name				
	6 LEONARDO STREET		†			Street A	ddres	ess (P.O. Box Number is Not Acceptable)		
CORAL GABLES FL 33146					83	<u> </u>			_	
					84	City		F	=1 85 Zip	o Code
11. Pursuant I	to the provisions of Sections	607,0502 and 6	07.1508, Florida Statu	tes, the a	abov	e-named c	corpor	ation submits this statement for the purpos	e of changing	its registered
agent I a	egistered agent, or both, in t m familiar with, and accept t	ine State of Flori he obligations o	ia. Such change was , Section 607.0505, F	autnorizi orida Sta	ed by atute:	/ ine corpo s.	oration	ation submits this statement for the purpos n's board of directors. I hereby accept the	appointment a	.s registered
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE. Reg 12. OFFICERS AND DIRECTORS						ent algnature r	required	when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS)RS IN 12
TITLE	D		· · · · · · · · · · · · · · · · · · ·		1 TITLE			Tibbliotojoti indea To att reenti.	Change	
NAME	YOUNG, MARY LOU NIMER 121		1.2 NAME							
STREET ADDRESS	6016 LEONARDO STREET		1.3 S		1.3 STREET ADDRESS					
CITY-ST-ZIP	CORAL GABLES FL				1.4 CITY-ST-ZIP					
TIFLE			DELETE 2.1 TO		2.1 TITLE				☐ Change	Addition
NAME	i		· · ·		2.2 NAME					
STREET ADDRESS	:SS		.		2,3 STREET ADDRESS					
CITY-ST-ZIP					2. 4 CITY-ST-ZIP 3.1 TITLE				Change	Addition
TITLE					3.2 NAME				Last Change	Addition
NAME						AUDDEGG				
STREET ADDRESS CITY-ST-ZIP	4		- 1	3.3 STREET ADDRESS 3.4. CITY - ST - ZIP					į	
TITLE			4.1 TITLE				Change	Addition		
NAME				4. 2 NAME					1	
STREET ADDRESS				4.3 9	STREET	ADDRESS				
CITY-ST-ZIP				4.4 (CITY-S	T-ZIP				
TITLE			DELETE	5.1	TITLE				☐ Change	Addition
NAME				5.21	NAME					
STREET ADDRESS				5.3	STREET	ADDRESS				
CITY - ST - ZIP				5.4 (CITY-S	T-ZIP		· · · · · · · · · · · · · · · · · · ·		,
TITLE			DELETE	6.17	TITLE				Change	: Li Addition
NAME					NAME	İ				
STREET ADDRESS				■ 639	STREET	ADORESS				1

14. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

FILED

Jan 20 1998 8:00am

Secretary of State