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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 19 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000028369 (4)

**DETAILED DESIGN CONCEPTS INC.** 

Principal Place	AVE	Mailing Address 110 SE 11TH AVE FT. LAUDERDALE FL 33301-2062							
						Date Incorporated or Qualifier     04/14/1994		ate of Last Re 08/1996	eport
2. Principal P	Place of Business	2a. Mailing Addr	oss			4. FEI Number			pplied For
21		26				65-0494744			of Applicable
Sulte, Apt.	#, etc.	<u>├</u>	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	
City & State		City & State	City & State			6. Election Campaign Financing			
23	-	28				Trust Fund Contribution		\$5.00 Added t	
Zip	Country	Zφ		Country		8. This corporation has liability for	or intangible		
24	25	29	30	]			Yes [		
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New I	Registered .	Agent	
	GEL, NORA M.			81	Name				
	S.E. 11TH AVENUE			82	Street Ad	idress (P.O. Box Number is Not Accept	able)		
FOR	RT LAUDERDALE FL 33301			83					
					_				
				84	City		FL	85 Zip (	Code
11. Pursuant office or i agent. I a	am familiar with, and accept the obli	gations of, Section 607.	0505, Florid	a Statutes		orporation submits this statement for the ration's board of directors. I hereby acc		changing its	s registered registered
12.	Signature typed or printed name of registered as OFFICERS AN	gent and theil applicable ND DIRECTORS	(NOT) Re	igistered Age	id signature rec	gured when reinstaling) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	S IN 12
TITLE	PD	DE	IEYE	11 TIRE		7.001110/01/111020 10 011	1021107110	Change	Addition
NAME	NORA GUQEL	:		1.2 NAME				-	
STREET ADDRESS	110 SE 11TH AVE			1.3 STREET	ADDRESS				
CITY-ST-ZIP	FT.LAUDERDALE FL 33301	·		1.4 CITY - S	I - 7iP				
TITLE	VPD	DELETE		2.1 TOLE				Change	Addition
NAME	LORI PRISTO			2.2 NAME	-				
STREET ADDRESS	110 SE 11TH AVE			2.3 STREET	ADDRESS				
CITY-ST-ZIP	FT.LAUDERDALE FL 33301	DE DE	CTE	2 4 C/TY - S		TREASURER		Change	<b>I</b> Addition
TITLE NAME				3.1 TITLE 3.2 NAME		TREASURER YVONNE 5. GUGEL 1 HARBOURSIDE DR.		Griange	Nonineal Perf
STREET ADDRESS				3.2 NAM! 3.3 STREET	Anneree .	HARBOURSIDE DR.	pt 470	/	
CITY-ST-ZIP	}			34. DITY-S	1 - 71P	DELRAY BEACH, FL 3	1483		
TITLE		D£	LETE	4.1 TITLE		<u> </u>		Change	Addition
NAME				4. 2 NAME	1				
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S	I-ZIP				
TITLE		DE	ETE	5.1 1011				Change	Addition
NAME				5.2 NAME					
STREET ADDRESS			•	53818661	ADDRESS				
CITY-ST-ZIP		·		5.4 CITY - S1	- 7IP				- <u></u>
TITLE		☐ DE	LETE	6.1 TrTLF				Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				

64 CHY-ST-7IP 14. I do 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 attaction in with an address.