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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 01 1997 8:00am

Secretary of State

0510373

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000054933 (4)

## **DESIGNMANIA INCORPORATED**

DESIGN	WANTA INCOMPORATED	ta Posta			FIGURE STATE STATE STATE STATES
Principal Place	e of Business	Mailing Address		[ (1101/101/11/11/11/11/11/11/11/11/11/11/1	DEFET BINK BIDGE FORED DIRECT IN 1889.
2358 W. EAU GALLIE BLVD SUITE 6 MELBOURNE FL 32935		2358 W. EAU GALLIE BLVD SUITE 6 MELBOURNE FL 32935 US			
US				3. Date Incorporated or Qualified 07/25/1994	3a. Date of Last Report 05/09/1996
21 = AHI	lace of Business = KS ABOVE	28. Mailing Address 26. SAME AS	ABOVE	4. FEI Number 59-3233176	Applied For Not Applicable
Suite Apt. #, etc		Suite, Apt. #, etc.	27		\$8.75 Additional Fee Required
City & Stati		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 	Country	Ζφ	Country	8. This corporation has liability for it	
24	25 9. Name and Address of Curre	29 30	01	Florida Statutes  10. Name and Address of New Re	Yes No
BIID		··· Annion on Lifetin	81 Name	SAME AS LEFT	
DUNGHAMUI, DUUGAS					
MELBOURNE FL 32935			82 Street Addr	ress (P.O. Box Number is Not Acceptab	le)
INCL	DOGUME I C OCODO		83		
			84 65		last 2:- Cada
			84 City		FL 85 Zip Code
11. Pursuant office or reasont. La	to the provisions of Sections 607.050 egistered agent, or both, in the State in lamiliar with, and accept the oblig	02 and 607, 1508, Florida Statutes e of Florida, Such change was aut gations of, Section 607,0505, Florida	, the above-named corp thorized by the corporal da Statut s.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
SIGNATURE	aggregate spread or printed inferie of registered ag	MOTS: (	Registered Agent algosture requi	Choo reinstating	1/8/9/
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
Tiff(f	P	DELETE	1,1 TITLE		Change Addition
NAMÉ (	BURGHARDT, DOUGLAS		1.2 NAME		
STREET ADDRESS	1431 CARIBEAN DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIF	MELBOURNE FL 32935		1.4 CITY-ST-ZIP		
TOTLE	V	☐ DELETE	2.1 TITLE		Change Addition
NAME	HEVIA, JILL		2.2 NAME		
STREET ADDRESS	355 S. OCEAN DRIVE #301		2 3 STREET ADDRESS		
CHY-ST-ZP	FORT PIERCE FL 34949		2. 4 CITY - ST - ZIP		
TITLE	ST	☐ DELETE	3.1 TITLE		Change Addition
NAME	BURGHARDT, AUDREY		3.2 NAME		
STREET ADDRESS	1431 CARIBEAN DRIVE		3.3 STREET ADDRESS		
City - St - 7iP	MELBOURNE FL 32935	☐ DELETE	3 4, CITY-ST-ZIP		Change Addition
TITLE	•		4.1 TITLE		C Change C Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-7IP TillE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		m simila m similar
}			5.3 STREET ADDRESS		
STREET ADDRESS					
Titut		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME.		Lad Decer	62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		Ì
CONTRACTOR (1997)	}		S. S. STILL I PODILLOS		Y

64 CITY-SI-ZIP

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 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 13 or Block 13 if changed, or on an attachment with an address.