

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 04 1998 8:00am  
Secretary of State

DOCUMENT # P94000089280 (9)

1. Corporation Name

DESIGNERS' EXPRESS, INC.



Principal Place of Business

1940 SW 83 AVE  
MIAMI FL 33155  
US

Mailing Address

P O BOX 654753  
MIAMI FL 33265  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/08/1994

4. FEI Number

65-0537482

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 13242 NW 10 Terr

Suite, Apt. #, etc.

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City & State

23 MIAMI FL

Zip

24 33182

Country

25 US

2a. Mailing Address

26 Suite, Apt. #, etc.

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City & State

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Zip

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Country

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9. Name and Address of Current Registered Agent

SENOR, MIRIAM  
1940 SW 83 AVE  
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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84 City

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Zip Code

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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 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME SENOR, MIRIAM

STREET ADDRESS 1940 SW 83 AVE.

CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME RUBIO, MICHAEL P

STREET ADDRESS 1940 SW 83 AVE.

CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME O'NEIL, GRAVERAN

STREET ADDRESS 6215 W 20 AVE., #211

CITY-ST-ZIP HIALEAH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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 13242 NW 10 Terr

1.4 CITY-ST-ZIP MIAMI FL 33182

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 13356 NW 8 Lane

2.4 CITY-ST-ZIP MIAMI FL 33182

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS 13242 NW 10 Terr

3.4 CITY-ST-ZIP MIAMI FL 33182

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

SIGNATURE

Signature

4/27/98

8052079065

CR2E034 (10/97)