## 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

DOCUMENT # P95000005072 (0)

LIVE DESIGNS, INC.

## **FILED** Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 5630 N.W. 80TH TERR 2269 S UNIVERSITY DR PARKLAND FL 33067 SUITE 147 DO NOT WRITE IN THIS SPACE DAVIE FL 33324 3. Date Incorporated or Qualified 01/20/1995 2. Principal Place of Business 2a. Mailing Address Applied For NW 80th Text 65-0556576 21 Not Applicable Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired PARKLAND, Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes **N**No 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LAWRENCE A. CAPLAN, P.A. Name 2424 N FEDERAL HWY 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 400 83 **BOCA RATON FL 33431** 84 Zip Code 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 office or 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 trie if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE Addition TITLE 1.1 TITLE Change FALB, WAYNE S NAME 1.2 NAME **5630 NW 80TH TER** STREET ADDRESS 1.3 STREET ADDRESS PARKLAND FL CITY-ST-ZIP 1.4 CITY-ST-2IP DELETE TITLE 2.1 TITLE Change Addition FALB. SALLY A NAME 2.2 NAME **5630 NW 80TH TER** STREET ADDRESS 2.3 STREET ADDRESS PARKLAND FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIE

14. Thereby 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 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 if changed, or on an attachment with an address.

SIGNATURE SALLY A. FOLK SEXTENCE (DARD OFAILL SOUTHORN 4/22/9)