

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000024402

Entity Name: DESIGNS BY TIFFANY, INC.

**FILED**  
**Feb 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5353 ASCOT BEND  
BOCA RATON, FL 33496 US

**New Principal Place of Business:**

**Current Mailing Address:**

5353 ASCOT BEND  
BOCA RATON, FL 33496 US

**New Mailing Address:**

FEI Number: 65-0570398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HELFT, LUCILLE  
5353 ASCOT BEND  
BOCA RATON, FL 33496 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HELFT, LUCILLE  
Address: 5353 ASCOT BEND  
City-St-Zip: BOCA RATON, FL 33496

Title: S  
Name: HELFT, ROBERT  
Address: 5355 ASCOT BEND  
City-St-Zip: BOCA RATON, FL 33496

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LUCILLE HELFT

P

02/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date