

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90058 021 ***150.00

DOCUMENT # P95000028706

1. Entity Name

DESIGNER LAMPS, INC.



Principal Place of Business

9592 POSITANO WAY
LAKE WORTH FL 33467

Mailing Address

9592 POSITANO WAY
LAKE WORTH FL 33467

2. Principal Place of Business

6644 MURANO WAY
Suite, Apt. #, etc.

3. Mailing Address

6644 MURANO WAY
Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

LAKE WORTH, FL

City & State

LAKE WORTH, FL

4. FEI Number

65-0573826

Applied For

Not Applicable

Zip

33467

Country

PALESTINE

Zip

33467

Country

PALESTINE

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVE.
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: P
NAME: MOTCHAN, PAUL
STREET ADDRESS: 9592 POSITANO WAY
CITY-ST-ZIP: LAKE WORTH FL 33467

TITLE: VP
NAME: MOTCHAN, HELENE
STREET ADDRESS: 9592 POSITANO WAY
CITY-ST-ZIP: LAKE WORTH FL 33467

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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STREET ADDRESS:
CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: P
NAME: MOTCHAN, PAUL
STREET ADDRESS: 6644 MURANO WAY
CITY-ST-ZIP: LAKE WORTH, FL. 33467

TITLE: VP
NAME: MOTCHAN, HELENE
STREET ADDRESS: 6644 MURANO WAY
CITY-ST-ZIP: LAKE WORTH, FL. 33467

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NAME:
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CITY-ST-ZIP:

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Heleene Motchan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/04

Date

Daytime Phone #