## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000028706

Entity Name: DESIGNER LAMPS, INC.

City-St-Zip: LAKE WORTH, FL 33467

FILED Apr 13, 2009 Secretary of State

| Littly Na                                   | IIIe. DESIGNI                                   | ER LAIVIFS, INC.   |   |  |  |
|---|---|--|---|--|--|
| Current Principal Place of Business:        |   |  | New Principal Place o                       | New Principal Place of Business:             |  |
|   | RANO WAY<br>PRTH, FL 3346                       | 57   |   |  |  |
| Current Mailing Address:                    |   |  | New Mailing Address                         | New Mailing Address:                         |  |
|   | RANO WAY<br>RTH, FL 3346                        | 57   |   |  |  |
| FEI Number                                  | : 65-0573826                                    | FEI Number Applied For()                                       | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and                                    | d Address of (                                  | Current Registered Agent:                                      | Name and Address of                         | New Registered Agent:                        |  |
| The above                                   | RIA AVE.<br>ABLES, FL 33<br>anamed entity       |  | purpose of changing its registered          | office or registered agent, or both,         |  |
|   | e of Florida.                                   |  |   |  |  |
| SIGNATUI                                    |   | sis Cianatura of Degistered Ag                                 | - mb  | Data   |  |
| Election Ca                                 |   | nic Signature of Registered Ag<br>g Trust Fund Contribution(). | ent   | Date   |  |
| OFFICERS AND DIRECTORS:                     |   |  | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | P (<br>MOTCHAN, PA<br>6644 MURANC<br>LAKE WORTH | WAY  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:                 | VP (<br>MOTCHAN, HE<br>6644 MURANC              |  | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                      |  |

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HELENE MOTCHAN VP 04/13/2009