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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #** P95000032328 (3)

FILED

53 JUN -5 7/10:17

1. Corporation DESIGN	N STORE, INC. Name "Home De	e changed to	l Camendments	TALLAMASSES, FLORIDA		
J_J,u.	"Home Do	sion Stone To	or "filed to 2		(} 10.0	
Principal Place			101 /			
· ·		Mailing Address				
480 BILTMORE WAY MAMI FL 33134 MIAMI FL 33134						
Minimum 12 001		MINNI TE COTOT		DO NOT WRITE IN THIS SI	PACE	
				3. Date Incorporated or Qualified		
				04/21/1995		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0587277	Not Applicable	
22]		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		Cily & State		6. Election Campaign Financing		
23		[28]		Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the curre	·-·	
24	25	29	30		Yes 🔲 No	
	g, Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered A	gent	
GUARINO, JOHN P			81 Name			
480 BILTMORE WAY			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
` MIAMI FL 33134			83			
_			63			
4			84 City	FL	85 Zip Code	
11. Pursuant i	to the provisions of Sections 607.05	502 and 607.1508, Florida Statu	ites, the above-named cor		changing its registered	
office or fi	egi ste red agent, or both, in the Sta .m fam iliar with, and accept the obli	te of Florida. Such change was igations of, Section 607.0505, F	authorized by the corpora lorida Statutes.	rporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoint	intment as registered	
SIGNATURE						
	Signature, typed or printed earne of registered a		1E Registered Agent signature requ			
12.	OFFICERS A	NO DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND		
NAME	G UARINO, JOHN P	Ortific	1.1 TITLE 1.2 NAME	_	Change Addition	
STREET ADDRESS	480 BILTMORE WAY		1.3 STREET ADDRESS	3000025578	3932	
CITY-ST-ZIP	MIAMI FL 33134		1.4 City-ST-ZIP	3000025576 -06/12/9801 *****550,00 t	003015	
TITLE		DELETE	2.1 TITLE	****550,00 _T	*************************************	
NAME			2.2 NAME			
STREET ADDRESS			23 STREET ADDRESS	· ·		
CITY-ST-ZIP			2 4 CITY-ST-ZIP			
TITLE		DELETE	3 1 TITLE		Change Addition	
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		T becer	3.4. CITY - ST - ZIP		-	
TITLE		☐ DELETE	4.1 TITLE	L	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition	
NAME		DECERT	5.2 NAME	L	T sugges [T] Vocation	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP		^	
TITLE		DELETE	6.1 TITLE		Change, Addition	
NAME			6.2 NAME	_	17/77/AQ	
STREET ADDRESS			6.3 STREET ADDRESS		~ M/51'	
CITY-ST-ZIP			64 CITY-ST-ZIP		UH	

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 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 truston, 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 attachaged.

(305)