

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000078129

FILED
Apr 23, 2004
Secretary of State

Entity Name: 3-D DESIGNS AND CONCEPTS, INC.

Current Principal Place of Business:

932 LAKE DESTINY RD., STE. B
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

914 LAKE DESTINY RD., STE. B
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

932 LAKE DESTINY RD., STE. B
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

914 LAKE DESTINY RD., STE. B
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3341660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCIS, WARRAND
932 LAKE DESTINY RD., STE. B
ALTAMONTE SPRINGS, FL 32714

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FRANCIS, WARRAND
Address: 932 LAKE DESTINY RD., STE. B
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FRANCIS, WARRAND
Address: 914 LAKE DESTINY RD., STE. B
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WARRAND FRANCIS

MR

04/23/2004

Electronic Signature of Signing Officer or Director

Date