

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

FILED
May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000000332

1. Corporation Name

Designs on Time, Inc.

Principal Place of Business 5420 Lyons Rd, #103 Coconut Creek, FL 33073	Mailing Address 5420 Lyons Rd, #103 Coconut Creek, FL 33073
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2. Principal Place of Business 21 5420 Lyons Rd Suite, Apt. #, etc. 22 103 City & State 23 Coconut Creek, FL Zip 24 33073 Country 25 USA	2a. Mailing Address 26 5420 Lyons Rd Suite, Apt. #, etc. 27 103 City & State 28 Coconut Creek, FL Zip 29 33073 Country 30 USA
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3. Date Incorporated or Qualified 1/1/96	3a. Date of Last Report
4. FEI Number	☒ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

The Law Firm of Lawrence Speigel, ^{attorney} ~~attorney~~
Chartered
DBA AmeriLawyer
343 Almeria Ave., Coral Gables, FL 33134

10. Name and Address of New Registered Agent

81 Name Alex Sender	82 Street Address (P.O. Box Number is Not Acceptable) 5420 Lyons Rd.	83 #103	84 City Coconut Creek	85 Zip Code FL 33073
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Alexander Sender Alexander I Sender 4/25/97
Signature, typed or printed name of registered agent and the corporation (NOTE: Registered Agent signature required when "reinstating") DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTSD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Alex Sender	1.2 NAME	
STREET ADDRESS	5420 Lyons Rd, #103	1.3 STREET ADDRESS	
CITY-ST-ZIP	Coconut Creek, FL 33073	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 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		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
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	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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 trustee 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 attachment with an address.

SIGNATURE: Alexander Sender Alexander Sender 4/25/97 (954) 764-2630
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE PHONE #

CR2E034 (9/96)