

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

FILED

May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000029338
1. Corporation Name
SUSY'S DESIGNS & SERVICES, INC.

Principal Place of Business Mailing Address
**7777 No. Wickham Rd.
Unit 12-124
Melbourne, FL 32940** **1010 Limerick Lane, #A-1
Rockledge, FL 32955**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1010 Limerick Lane		2a. Mailing Address 1010 Limerick Lane		3. Date Incorporated or Qualified March 25, 1996	
2b. Suite, Apt. #, etc. #A-1		2c. Suite, Apt. #, etc. #A-1		4. FEI Number 59-3373368	
2d. City & State Rockledge, Florida		2e. City & State Rockledge, Florida		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
2f. Zip 32955		2g. Zip 32955		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
2h. Country Brevard		2i. Country Brevard		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent David B. Ferguson 1010 Limerick Lane, #A-1 Rockledge, FL 32955-3240				10. Name and Address of New Registered Agent	
81. Name				82. Street Address (P.O. Box Number is Not Acceptable)	
83.				84. City	
				85. Zip Code FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1501, 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

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS				13.			
1.1 TITLE ☐ DELETE				1.1 TITLE ☐ Change ☐ Addition			
1.2 NAME Susan Ferguson				1.2 NAME			
1.3 STREET ADDRESS 1010 Limerick Lane, #A-1				1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP Rockledge, FL 32955				1.4 CITY-ST-ZIP			
2.1 TITLE ☐ DELETE				2.1 TITLE ☐ Change ☐ Addition			
2.2 NAME David B. Ferguson				2.2 NAME			
2.3 STREET ADDRESS 1010 Limerick Lane, #A-1				2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP Rockledge, FL 32955				2.4 CITY-ST-ZIP			
3.1 TITLE ☐ DELETE				3.1 TITLE ☐ Change ☐ Addition			
3.2 NAME				3.2 NAME			
3.3 STREET ADDRESS				3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP				3.4 CITY-ST-ZIP			
4.1 TITLE ☐ DELETE				4.1 TITLE ☐ Change ☐ Addition			
4.2 NAME				4.2 NAME			
4.3 STREET ADDRESS				4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP				4.4 CITY-ST-ZIP			
5.1 TITLE ☐ DELETE				5.1 TITLE ☐ Change ☐ Addition			
5.2 NAME				5.2 NAME			
5.3 STREET ADDRESS				5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP				5.4 CITY-ST-ZIP			
6.1 TITLE ☐ DELETE				6.1 TITLE ☐ Change ☐ Addition			
6.2 NAME				6.2 NAME			
6.3 STREET ADDRESS				6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP				6.4 CITY-ST-ZIP			

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14. 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 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, and that I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in

SIGNATURE: **David B. Ferguson** **4/28/98** **(407) 620-6222**