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

PROFIT CORFORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000041888

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DORIC DESIGNS, INC					
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Principal Place	e of Business	Mailing Address		1 (#81500) sim injin ausin annis aniit naic	I MOTEL MINNE TINSS IRSON FORMS (851) FAND
3750 ROYAL P	ALM AVE	3750 ROYAL PALM AVE			·
MIAMI BEACH FL 33140 MIAMI BEACH FL 33140				SO MOT WOLTE IN	TIUD 004.0F
us				DO NOT WRITE IN THIS SPACE	
,	•			3. Date Incorporated or Qualifed	
	<u> </u>			05/16/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number.	Applied For
21		26		65-0673213	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & Stat	G e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current ye	ear Intangible
24	25	29	30	Personal Property Tax.	ŬYes □No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Regist	ered Agent
	A STATE OF THE STA		81 Name		1,1
	RSOX, JUNE		82 Street Add	tress (P.O. Box Number is Not Acceptable)	
2665 S BAYSHORE DR #420			oli col Add	Tool box Hambol to Not Hoseptable)	
MIAMI FL 33133			83		于"智慧物情况"
			94 City	* * * * * * * * * * * * * * * * * * *	85 Zip Code
			84 City		FL S Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpo	se of changing its registered
office or r	egistered agent or both in the State	of Florida. Such change was au	thorized by the cornerati	ion's board of directors. I become accept the :	annointment as registered
	m familiar with and accept the obliga-	tions of Section 607 0505. Flor	ida Statutes	don's board of directors. Thereby accept the	appointment as registered
_	im familiar with, and accept the obliga	tions of, Section 607.0505, Flor	ida Statutes.	and a board of directors. Thereby accept the	appointment as registered
SIGNATURE	im familiar with, and accept the obligation of registered ager	tions of, Section 607.0505, Flor	Registered Agent signature requir	· · · · · · · · · · · · · · · · · · ·	
_	im familiar with, and accept the obligation of t	tions of, Section 607.0505, Flor	ida Statules.	· · · · · · · · · · · · · · · · · · ·	RS AND DIRECTORS IN 12
SIGNATURE	im familiar with, and accept the obligation of t	nt and title if applicable. (NOTE:	Registered Agent signature require	red when reinstating) 5 DA	<u>πε</u>
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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 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90052 022 ***150.00

305-854-0800