

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000046626

1. Entity Name
DANNY'S DESIGNS, INC.



Principal Place of Business
1806 SEFFNER-VARICO ROAD
SEFFNER, FL 33584

Mailing Address
1806 SEFFNER-VARICO ROAD
SEFFNER, FL 33584



04242004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3380292

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MILLER, DANNY
1806 SEFFNER VALRICO ROAD
SEFFNER, FL 33584

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000130941
04/26/04-60139-009 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MILLER, DANNY RAYMOND
STREET ADDRESS	1806 SEFFNER-VARICO ROAD
CITY-ST-ZIP	SEFFNER, FL 33584

TITLE	STD
NAME	MILLER, LETHA FAYE
STREET ADDRESS	1806 SEFFNER-VARICO ROAD
CITY-ST-ZIP	SEFFNER, FL 33584

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DANNY R. MILLER 4-24-04 813 6843618