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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000055349 (0)

DESIGN STATION, INC.

PERRY, MICHELE

WANKAT, DAVID

3811 PENDLEBURY DR

WANKAT, KIMBERLY

**38**11 PENDLEBURY DR

PALM HARBOR FL 34685

PALM HARBOR FL 34685

8705 CRANE'S ROOST DR

**NEW PORT RICHEY FL 34654** 

NAME

TITLE

NAME

TITLE

NAME

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY+ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Principal Place of Business

8705 CRANE'S ROOST DR **PO BOX 486 NEW PORT RICHEY FL 34654** NEW PORT RICHEY FL 34656-0486 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/28/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3384510 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Zip Country Zφ 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name wankat, kimberly k 3811 **PENDLEBURY** DR Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 34685 83 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** (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Addition DELETE Change 11 TITLE TITLE PERRY, MICHAEL NAME 1.2 NAME 8705 CRANE'S ROOST DR STREET ADDRESS 1.3 STREET ADDRESS **NEW PORT RICHEY FL 34654** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE

2.2 NAME

31 TITLE

3 2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

☐ DELETE

DELETE

2 3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

2.4 CITY-ST-ZIP

6.4 C/TY-SI-ZIP

14. I hereby certify that the information supplied with this filling 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 frustoe 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.

BIGNATURE VM Ahelo M DOAN .

RUCKIR

CR2E034 (10/97)

☐ Addition

Addition

Addition

Addition

Change

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Change

Change

**FILED** 

Apr 29 1998 8:00am

Secretary of State