

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000057712

FILED
Apr 13, 2004
Secretary of State

Entity Name: HOLLYWOOD DESIGN & CONCEPTS INC.

Current Principal Place of Business:

405 N DIXIE HWY
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

405 N DIXIE HWY
HALLANDALE, FL 33009 US

New Mailing Address:

FEI Number: 65-0738530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WADE, DAVID L
405 N. DIXIE HIGHWAY
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WADE, DAVID L
Address: 405 N DIXIE HWY
City-St-Zip: HALLANDALE, FL 33009

Title: VP () Delete
Name: ELSBURY, JULIE
Address: 405 N DIXIE HWY
City-St-Zip: HALLANDALE, FL 33009

Title: VP () Delete
Name: HERMAN, MICHAEL
Address: 405 N. DIXIE HWY.
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID WADE

P

04/13/2004

Electronic Signature of Signing Officer or Director

Date