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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State SION OF CORPORATIONS

•	1999 🔏	DIVISION OF	CORPOR	AIR	JINO	03-10-1999 90144 0	33 130.0)()
1. Corporation	MENT # P9600 Name UEZ DESIGN GROUP, IN							
Principal Place of Business Mailing Address								
1770 NW 64TH ST. STE 690 FORT LAUDERDALE FL 33309 1770 NW 64TH ST. STE 690 FORT LAUDERDALE FL 33309						DO NOT WRITE IN THI	S SPACE	
						3. Date Incorporated or Qualifed 07/18/1996	-	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Apr	olied For
21		26	26			65-0680270	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	——————————————————————————————————————			5. Certifcate of Status Desired	\$8.75 A Fee Red	
City & State	Э	City & State	· · · · · · · · · · · · · · · · · · ·			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip 24	Country Zip 25 29 3			ntry		8. This corporation owes the current year Intangible Personal Property Tax. Yes No		
	9. Name and Address of Cur	rrent Registered Agent		<u> </u>		10. Name and Address of New Registere	d Agent	
RODRIGUEZ, ENRIQUE L 1770 NW 64TH ST. STE 630				81 82	82 Street Address (P.O. Box Number is Not Acceptable)			
FUR	T LAUDERDALE FL 33309			83				
				84	City	F		
office or re	egistered agent, or both, in the St	0502 and 607.1508, Florida Statu ate of Florida. Such change was a ligations of, Section 607.0505, Flo	authonzed	l-Dy-i	the corpora	orporation submits this statement for the purpose ation's board of directors. I hereby accept the app	of changing its ointment as reg	registered pistered
_	,							_
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOT	E: Registered	Agen	t signature req	uired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS					ADDITIONS/CHANGES TO OFFICERS		
TITLE	D DELETE		1.1 TF	1.1 TITLE			☐ Change	☐ Addition
NAME	RODRIGUEZ, ENRIQUE L		1.2 N/	1.2 NAME				
STREET ADDRESS	1770 NW 64TH ST. STE 630		1.3 \$1	1.3 STREET ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 33309			14 CITY-ST-ZIP		F = 1		
TITLE	☐ DELETE		2.1 TI	2.1 TITLE		•	☐ Change	☐ Addition
NAME			2.2 N	2.2 NAME			•	
STREET ADDRESS			2.3 ST	2.3 STREET ADDRESS				
CITY-ST-ZIP				2. 4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		
TITLE	DELETE		3.1 Tr	3.1 TITLE			Change	☐ Addition
NAME			3.2 N	3.2 NAME				
STREET ADDRESS				3.3 STREET ADDRESS 3.4. CITY-ST-ZIP				
CITY-ST-ZIP		□ DELETE	3.4. C		1-ZIP		☐ Change	Addition
MT: F	İ		■ 4.1 II	, LE	- 1		2,,441,55	

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 emittal 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.

4.2 NAME 4.3 STREET ADDRESS

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

44 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE: 2

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY+ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Change

☐ Change

Addition

Addition