## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600065400 (9) STUDIO OF DESIGN, INC.

## **FILED** Sep 23 1997 8:00am Secretary of State



						-{		
Principal Plac		•	Mailing Address					
	DRE BLVD. STE 1078		1400 GULFSHORE BLVD. STE 107B					
NO NAPLES FL 34102		NO MAPLES PL 34102	NO NAPLES FL 34102			DO NOT WRITE IN THIS SPACE		
Ì						3. Date Incorporated or Qualified	3a. Date of Las	st Report
						08/05/1996		·
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For
21 Jame	as akone	26 Same and	26 Same as aboxe			65-0698595		Not Applicable
Sulte Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.7	5 Additional
22		27	27			5. Certificate of Status Desired		Required
City & Stat	е	City & State	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28	28			Trust Fund Contribution		
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid	d the current year	Intangible
24	25 29 30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of Curre	nt Registered Agent		T		10. Name and Address of New Reg	istered Agent	
Winnie, John S				81 Name				
	0 5TH AVENUE SO STE 211		82 Street Ad			ess (P.O. Box Number is Not Acceptable	e)	
NAP	LES FL 34102							
				83				
			ŀ	84	City		<b>85</b> Z	ip Code
				ויי	City		FL 🎳 '	ip code
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, Soction 607.0505, Florida Statutes.								
SIGNATURE								
Signature, typed or preside name of registered agent and trie if applicable (NOTE Registered Agent a gnature required when reinstaling)								
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE		
TITLE	owner	☐ DELETE	1.1 Tril LE				☐ Chan	ge 🗌 Addition
NAME			1.2 NA	1.2 NAME				
STREET ADDRESS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1.3 STREET ADDRESS		ADORESS			
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NAME			1	22 NAME				
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS			
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NAME			3.2 NAME		Į			l
STREET ADDRESS			3.3 STREET ADDRESS					]
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TITLE	☐ DELETE			4.1 TITLE			☐ Chan	ge
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CITY-ST-ZIP				4.4 CITY-ST-ZIP			[] Ober	- I december
TITLE				5.1 TITLE			L Chan	ge L Addition
NAME	•			5.2 NAME				
STREET ADDRESS				5.3 STREET ADDRESS				1
CITY-ST-ZIP	Descri		_	5.4 CITY - ST - ZIP			Flas	
TITLE	L] DELETE			6.1 TITLE			∟ Chan	ge [_] Addition
NAME			6.2 NA		İ			
STREET ADDRESS			63 ST	AEET A	ADDRESS			
CITY-ST-ZIP	by contifu that the information curvation	al tab Alia film about a constitu	6400	1Y-\$T		in Section 110 07/9Vi). Elected Statuton	1 5 male on a marks - 4	h-14

I be a broad that the information supplied with this mining does not quality for the exemption stated in Section 118.07(3)(1). Florida Statutes, I further bettiry 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. ALLOW TO BE STORY OF THE PARTY all 11 7 0001