

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000086294

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: EILEEN PLASKY DESIGN ASSOCIATES, INC.

**Current Principal Place of Business:**

C/O EILEEN PLASKY  
221 ARAGON AVE, STE 201  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

GELBER & COMPANY  
11450 INTERCHANGE CIRCLE NORTH  
MIRAMAR, FL 33025 US

**New Mailing Address:**

FEI Number: 65-0704027      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PLASKY, EILEEN D  
C/O EILEEN PLASKY  
221 ARAGON AVE, STE 201  
CORAL GABLES, FL 33134 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: PD ( ) Delete  
Name: PLASKY, EILEEN D  
Address: 221 ARAGON AVE., STE. 201  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: EILEEN PLASKY

PD

01/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date