

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000020539

Entity Name: S.L.F. DESIGNS INC.

FILED  
May 04, 2005  
Secretary of State

**Current Principal Place of Business:**

103 SEABREEZE CIRCLE  
JUPITER, FL 334776415 US

**New Principal Place of Business:**

**Current Mailing Address:**

103 SEABREEZE CIRCLE  
JUPITER, FL 334776415 US

**New Mailing Address:**

FEI Number: 65-0737618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISHER, SARA L  
103 SEABREEZE CIRCLE  
JUPITER, FL 334776415 US

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

FISHER, SARA L PRES  
103 SEABREEZE CIRCLE  
JUPITER, FL 334776415 US

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: SARA L. FISHER

05/04/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: FISHER, SARA L  
Address: 103 SEABREEZE CIRCLE  
City-St-Zip: JUPITER, FL 334776415

**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 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: SARA L. FISHER

PRES

05/04/2005

Electronic Signature of Signing Officer or Director

Date