Applied For

Not Applicable

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000025145 (8)
1. Corporation Name

BRAND X DESIGN, INC.

Principal Place of Business

2840 SOMERSET DRIVE

SUITE 418 FORT LAUDERDALE FL 33311

2. Principal Place of Business

305 S. ANDREWS AUE

Mailing Address

2a. Mailing Address

2840 SOMERSET DRIVE

SUITE 418

FORT LAUDERDALE FL 33311

305 S. ANGREWS AVE

ALED

98 OCT 26 PM 12: 42

SECRETATY OF STATE TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE
3. Date incorporated or Qualified
03/20/1997

4. FEI Number

65.0736045

Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & Stat	LAUDERDALE, FLARBOY			Added to 1 des
Zip 24 333		Zip 29 33301 30	U.S.A	1 dischart topolity fox ode dulle do. 21 feb
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
DELANEY, GERARD			81 Name	SERGIO PINON
2840 SOMERSET DRIVE			82 Street	Address (P.O. Box Number is Not Acceptable)
SUITE 418			30	5 S. ANDREWS AVENUE
FORT LAUDERDALE FL 33311				200
				TE 302
			84 City	
11. Pursuant to the provisions of sections 697-950/and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered egent, 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, section 607.0505, Florida Statutes.				
SIGNATURE				
Signature, typod or pheted name of registered agent and other applicable. (NOTE. Registered Agent signature required when reinstating)  DATE				
12.	D (SEFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DELANEY, GERARD	DELETE	1.1 TITLE	Change Addition
NAME			1.2 NAME	8000026786089
STREET ADDRESS	1509 S.W. 1ST STREET #1		1.3 STREET ADDRESS	-11/03/9801014013
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		1.4 CITY-ST-ZIP	****550.00 ****550.00
TITLE	D	☐ DELETE	2.1 TITLE	Change Addition
NAME	LACZ, JOHN THEODORE		2.2 NAME	r
STREET ADDRESS	2840 SOMERSET DRIVE, #418		2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	-	2.4 CITY-ST-ZIP	· — · · · · · · · · · · · · · · · · · ·
TITLE	D	☐ DELETE	3.1 TITLE	Change Addition
NAME	PINON, SERGIO ANTHONY		3.2 NAME	
STREET ADDRESS	2041 WINNERS CIRCLE		3.3 STREET ADDRESS	14625 SHOTGUN ROAD
CITY-ST-ZIP	NORTH LAUDERDALE DL 33306		3.4 CITY-ST-ZIP	DAVIE, ## FL 33325
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	. 1
TITLE		DELETE	5,1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	18
STREET ADDRESS			5.3 STREET ADDRESS	$\mathcal{L}_{\mathcal{L}_{0}}$
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Change Addition
TITLE		DELETE	6,1 TITLE	Change Addition
NAME		I	6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 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 supplied 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 of 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.

SIGNATURE:

INSTURE REQUIRED

9.30.98 954.764.2502

CR2E034 (5/98)