2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000033124

Entity Name: PASTELS DESIGN, INC.

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1842 SE FLORESTA DR. PORT SAINT LUCIE, FL 34983 Current Mailing Address: 1842 SE FLORESTA DR. PORT SAINT LUCIE, FL 34984 Current Mailing Address: New Mailing Address: 1842 SE FLORESTA DR. PORT SAINT LUCIE, FL 34983 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X Name and Address of Current Registered Agent: BITETTO, VITO 1842 SE FLOREST DR. PORT SAINT LUCIE, FL 34983 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). DOFFICERS AND DIRECTORS: Title: P () Delete Name: BITETTO, UTO Name: BITETTO, UTO Name: Address: 1842 SE FLORESTA DR. City-St-Zip: PORT SAINT LUCIE, FL 34983 City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063 City-St-Zip: PORT SAINT LUCIE, FL 34984					
PORT SAINT LUCIE, FL 34983 PORT SAINT LUCIE, FL 34984 Current Mailing Address: New Mailing Address: 1629 SW BILTMORE STREET PORT SAINT LUCIE, FL 34984 FEI Number: 65-0758940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X Name and Address of New Registered Agent: BITETTO, VITO 1842 SE FLOREST DR PORT SAINT LUCIE, FL 34983 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or to in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P () Delete Name: BITETTO, VITO Name: BITETTO, UCIC Name: BITETTO, ROCCO Name: BITETTO, ROCCO Name: BITETTO,	Current I	Principal Place of Business:	New Principal Place of Business:		
1842 S.E. FLORESTA DR. PORT SAINT LUCIE, FL 34983 FEI Number: 65-0758940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X Name and Address of Current Registered Agent: BITETTO, VITO 1842 SE FLOREST DR. PORT SAINT LUCIE, FL 34983 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or to in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Electronic Signature of Registered Agent Date Date Electronic Signature of Registered Agent Date FITTIC: P () Delete Name:					
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Name and Address of Current Registered Agent: BITETTO, VITO 1842 SE FLOREST DR. PORT SAINT LUCIE, FL 34983 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or to in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date					
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Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: OFFICERS AND DIRECTORS: Title: P () Delete Name: BITETTO, VITO Address: 1842 S.E. FLORESTA DR. City-St-Zip: PORT SAINT LUCIE, FL 34983 Title: C () Delete Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: BITETTO, LUCY Name: BITETTO, LUCY Address: 601 N.W. 77TH AVENUE City-St-Zip: MARGATE, FL 33063 Title: VP () Change (X) Addition Name: Name: BITETTO, ROCCO Address: 1842 SE FLOREST DRIVE	PORT SA The abov	AINT LUCIE, FL 34983 US re named entity submits this statement for the	purpose of changing its registered office or registered agent,	or both,	
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	Name:	() Delete	(, 3 - (,		

I hereby certify that the information supplied with this filing does not qualify for the 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: VITO BITETTO P 04/17/2006