

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000033901

1. Corporation Name

ALTERNATIVE DESIGNS & INVESTMENTS INC

## May 05, 1999 8:00 am Secretary of State

05-05-1999 90218 028 \*\*\*150.00



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Principal Place	e of Business	Mailing Address					
23291 FEATHER PALM CT 23291 FEATHER PALM CT							
BOCA RATON FL 33433 BOCA RATON FL 33433					DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualifed	AOL	
					04/14/1997		İ
2 Principal P	flace of Business	2a. Mailing Address	_	· · ·	4. FEI Number	App	olied For
21		26			65-0602429	<u> </u>	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 A	dditional
22		- 27				Fee Rec	quired
City & State	le	City & State			6. Election Campaign Financing	\$5.00 N	May Be
23		28		_	Trust Fund Contribution	Added to	
Zip	Country	Zip	Cour	try	8. This corporation owes the current year Intan	gible	
24	25	29	30				□No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered Ag	gent	
	IO MORET		-	81 Name			}
	IG, MORITZ		ŀ	82 Street Ac	idress (P.O. Box Number is Not Acceptable)		
23291 FEATHER PALM CT							
BUC	A RATON FL 33433		ì	B3			\
	•		ļ	84 City	FL	85 Zip C	ode
dd Dimeriant	to the manifelians of Continue 607.05	100 and 607 1509 Florido Statut	oo tho oh	ave named se	orporation submits this statement for the purpose of ch	anging its r	registered
l office or n	registered agent, or both, in the State	e of Florida. Such change was at	uthorized	hy the cornors	ation's board of directors. I hereby accept the appointr	nent as reg	istered
agent. I a	im familiar with, and accept the oblig	ations of, Section 607.0505, Flor	rida Statu	es.			,
SIGNATURE	Signature hand as adulad almo of registered as	and title if applicable /NOTE	- Degistered	nent cianature rea	uired when reinstating) DATE		
				gorit (agriotato Toqu		DIRECTOR	DC IN 12
1 12	UFFICERS A	ND DIRECTORS	<b>13.</b>		ADDITIONS/CHANGES TO OFFICERS AND	DINECTO	72 IN 12
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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 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 eceiver 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 aftachment with an address, with all other like empowered.

(SIGNATURE:

CR2E034 (11/98)