2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 18, 2007 08:00 A Secretary of State DOCUMENT # P97000033901 ALTERNATIVE DESIGNS & INVESTMENTS INC Principal Place of Business Mailing Address 23291 FEATHER PALM CT 23291 FEATHER PALM CT BOCA RATON, FL 33433 BOCA RATON, FL 33433 03122007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0602429 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GANG, MORITZ DO NOT WRITE 23291 FEATHER PALM CT BOCA RATON, FL 33433 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent DATE d title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 **\$5.00** May Be \Box Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE GANG, MORITZ NAME 23291 FEATHER PALM CT STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33433 TITLE : NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS U000000714620⁻ CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED