

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Aug 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000037313
1. Corporation Name

New Design of SO FLORIDA CORP

Principal Place of Business 1705 WEST 49 th ST WESTLAND MALL MIAMI, FL 33012	Mailing Address 1240 SOUTH DIXIE HWY CORAL GABLES, FL 33146
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1240 South Dixie Hwy Suite, Apt. #, etc. 22 City & State 23 CORAL GABLES, FL Zip 24 33146 Country 25 USA		2a. Mailing Address 26 1240 South Dixie Hwy Suite, Apt. #, etc. 27 City & State 28 CORAL GABLES, FL Zip 29 33146 Country 30 USA		3. Date Incorporated or Qualified 4/25/97 4. FEI Number 65-0749952 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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9. Name and Address of Current Registered Agent

MILDRED MARULANDA
1240 SOUTH DIXIE HWY
CORAL GABLES, FL 33146.

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILDRED MARULANDA	1.2 NAME	
STREET ADDRESS	1240 South Dixie Highway	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES, FL 33146	1.4 CITY-ST-ZIP	
TITLE	VSD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JENNIFER SIERRA	2.2 NAME	
STREET ADDRESS	1240 South Dixie Highway	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES, FL 33146.	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		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 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 receiver 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 attachment with an address.

CP2E034 (10/97)

Mildred Marulanda

7/17/98 (33146) 1212

YESIT J. CAMPO, PA
CERTIFIED PUBLIC ACCOUNTANT

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July 7, 1998

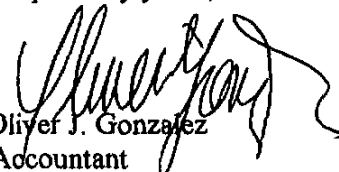
Florida Department of State
Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, FL 32302-1500

Re: New Designs of So Florida Corp
1240 South Dixie Highway
Coral Gables, FL 33146
FEI: 65-0749952
Document#: P97000037313

To Whom It May Concern:

As the accountant for the corporation aforementioned I am writing this letter to you as was suggested by a representative from your department. The reason that this annual corporate report wasn't filed in a timely manner is that my client never received one. I called your 1-800 number and the representative that spoke to me told me that I needed to fill out a blank corporate annual form, write an explanatory letter, and send a check for \$150. I hope this letter is of aid to you in processing the 1998 corporate annual report for New Designs of So Florida Corp.

Respectfully yours,


Oliver J. Gonzalez
Accountant

P.S. If you should have any questions regarding this matter please call me at (305)593-2003.