


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 16, 2004 8:00 am**  
**Secretary of State**

02-16-2004 90035 027 \*\*\*158.75

**DOCUMENT # P97000067188**

1. Entity Name  
**HUDARI DESIGN, INC.**



Principal Place of Business  
**2968 SW 8 ST  
 MIAMI, FL 33135**

Mailing Address  
**2968 SW 8 ST  
 MIAMI, FL 33135**

01000063

2. Principal Place of Business

3. Mailing Address  
**4011 W. FLAGLER ST**

Suite, Apt. #, etc.  
**503**



02112004 Chg-P CR2E034 (10/03)

City & State  
**MIAMI FL.**

City & State  
**MIAMI FL.**

Zip  
**33134**

Country  
**USA**

4. FEI Number  
**65-0773823**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**RICO, CARLOS H  
 2968 SW 8 ST  
 MIAMI, FL 33135**

7. Name and Address of New Registered Agent

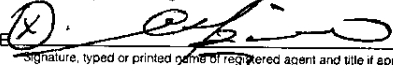
Name  
**RICO, CARLOS H**

Street Address (P.O. Box Number is Not Acceptable)  
**4011 W. FLAGLER ST. SUITE 503**

City  
**MIAMI**

FL Zip Code  
**33134**

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.

SIGNATURE  DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	RICO, CARLOS H	2968 SW 8 ST	MIAMI, FL 33135	<input type="checkbox"/>
D	GUTIERREZ, ANA CRISTINA	2968 SW 8 ST	MIAMI, FL 33135	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
D	RICO, CARLOS H	11025 SW 62 AVE	MIAMI, FL 33156	<input type="checkbox"/>	<input type="checkbox"/>
D	GUTIERREZ ANA CRISTINA	11025 SW 62 AVE	MIAMI, FL 33156	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 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:  DATE \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR