

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000070361

FILED
Jan 31, 2011
Secretary of State

Entity Name: BARBARA ONDO DESIGNS, INC.

Current Principal Place of Business:

5415 SAN JOSE BLVD
SUITE A
JACKSONVILLE, FL 322077612

New Principal Place of Business:

Current Mailing Address:

5415 SAN JOSE BLVD
SUITE A
JACKSONVILLE, FL 322077612

New Mailing Address:

FEI Number: 59-3465923 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MORRISON, BARBARA ONDO
4176 PRIMA VISTA CIR. NORTH
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: MORRISON, BARBARA ONDO
Address: 5415 SAN JOSE BLVD., SUITE A
City-St-Zip: JACKSONVILLE, FL 322077612

Title: VPST
Name: MORRISON, R S
Address: 5415 SAN JOSE BLVD., SUITE A
City-St-Zip: JACKSONVILLE, FL 322077612

I hereby 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 all other like empowered.

SIGNATURE: R. S. MORRISON

VP

01/31/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date