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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # **P97000073969**1. Corporation Name

TIME TO DESIGN, INC.

FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90044 047 ***150.00



	*							
Principal Place of Business Mailing Address						88 11110 18110 0	1110 1017 1001	
2255 GLADES ROAD. SUITE 324A BOCA RATON FL 33431 2255 GLADES ROAD. SUITE 32 BOCA RATON FL 33431						DO NOT WRITE IN THIS S	SPACE	
		-				3. Date incorporated or Qualifed 08/25/1997		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Apr	lied For
			33			65-0826190		Applicable
26			etc.				\$8 75 4	
22 27			·	= =		5. Certificate of Status Desired	Fee Rec	
City & State City & State						6. Election Campaign Financing	\$5.00 N	May Be
23						Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intar		_
24 25 29 30						1 Grooman reporty rax:		No
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registered A	gent	
MEC	LID CLICAN A			81	Name	•		
MEGUR, SUSAN A 2255 GLADES ROAD, SUITE 324A BOCA RATON FL 33431				82	Street Addr	iress (P.O. Box Number is Not Acceptable)		
BUU	A MATUN PL 33431			83				
				84	City	-	85 Zip C	ode
		***			<u></u>	FL.	hanaisa ita i	
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblic	e of Florida, Such change	e was authorized	bv	the corporation	oration submits this statement for the purpose of clon's board of directors. I hereby accept the appoint	ment as reg	istered
SIGNATURE								
	Signature, typed or printed name of registered as	· · · · · · · · · · · · · · · · · · ·	(NOTE: Registered	Agen	t signature required		BIRECTO	70.0140
12.	. <u> </u>	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
TITLE	D AUGUS AUGUS A	☐ DEI					C. Onlango	
NAME	MEGUR, SUSAN A	0044	1.2 NA		1			
STREET ADDRESS	2255 GLADES ROAD, SUITE	324A			ADDRESS			}
CITY-ST-ZIP	BOCA RATON FL 33431	□ DEI	1.4 CT		T-ZIP		Change	Addition
TITLE	D AFOUR STOUTH		1					
NAME	MEGUR, STEVEN J	0044	2.2 NA					
STREET ADORESS	2255 GLADES ROAD, SUITE	324A			ADDRESS		-	
CITY-ST-ZIP	BOCA RATON FL 33431	DEI	2.4 CI LETE 3.1 TIT		ST-ZIP		☐ Change	Addition
TITLE	D MEGUD SCOTT E	,	3.1 III					
NAME	MEGUR, SCOTT E 2255 GLADES ROAD, SUITE	3244	1		ADDRES\$			}
STREET ADDRESS	BOCA RATON FL 33431	UETA						
C/TY-ST-ZIP	DOOR TIATON FE 30401	□ DEI	3.4. CI LETE 4.1 TIS		11-4IF		Change	Addition
TITLE			4.1 III				_ •	-
NAME STREET ADDRESS					T ADDRESS			1
STREET ADDRESS			4.3 ST		j			
CITY-ST-ZIP TITLE		☐ DE			1 - AJIF		Change	Addition
NAME :			5.2 NA					{
STREET ADDRESS			1		TADDRESS			
CITY-ST-ZIP			5.4 CF					
TITLE		☐ DE			<u> </u>		☐ Change	Addition
NAME			6.2 NA	ME		•		
STREET ADDRESS	k		6.3 ST	REET	ADDRESS			

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: