2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000086965

1. Entity Name
LIQUID ASSETS BY DESIGN, INC.

Principal Place of Business

11126 LAKELAND CIRCLE
FORT MYERS, FL 33913

Mailing Address

11126 LAKELAND CIRCLE
FORT MYERS, FL 33913   US

01122005   No Chg-P   CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
65-0786286	Not Applicable

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

6. Name and Address of Current Registered Agent

MEHL, KEVIN C
11126 LAKELAND CIRCLE
FORT MYERS, FL 33913

DO NOT WRITE 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.

SIGNATURE

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MEHL, KEVIN C
STREET ADDRESS	11126 LAKELAND CIRCLE
CITY-ST-ZIP	FORT MYERS, FL 33913

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000182681
01/19/05-80038-007 150.00

DO NOT WRITE IN THIS SPACE

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: _Kevin C. Mehl   Director_   1/12/05   2397071517

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #