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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000103319

1. Corporation Name

**ELEMENTS OF DESIGN, INC.** 

•

Mailing Address

## FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90062 030 \*\*\*150.00



Fillicipal Flact		Hidling Address			
2542 JARDIN	<del></del>	2542 JARDIN			
WESTON FL 33	327	WESTON FL 33327		DO NOT WRITE IN	THIS SDACE
US		US		3. Date Incorporated or Qualifed	THIS SPACE
				12/09/1997	
		A Marilla Address		4. FEI Number	Applied For
2. Principal Pl	lace of Business  2 JARDIN TERRACI	2a. Mailing Address	ICTEDDACE	65-0806406	Not Applicable
21 254.			NICKRACC	03-0000400	\$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Required
22		City & State	<u> </u>	Average a construction of the contract of the	
City & State	Toul El		•	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 VVE>	IUN, FL	28 W 65 10N, FL	Country		
Zip	Country	— ^~~~ <u> </u>	n lie	<ol><li>This corporation owes the current ye Personal Property Tax.</li></ol>	Yes DNo
<u>24</u> <u> </u>	25 1			10. Name and Address of New Regist	
	9. Name and Address of Current	Kegistered Agent	81 Name, A		
VASC	QUEZ, MELINDA L		L VA	SQUEZ, MELINDA	
	2 JARDIN		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	CE
	TON FL 33327		83	L JAKUIN IEKKA	
1120	7.014 1 2 0002		83		
·			84 City WE	CTOLL	E1 85 Zip Code 7
		CO7 4500 Flands Proteston	the above named some	oration submits this statement for the purpo	se of changing its registered
office or re agent. I a	egistered agent, or both, in the State of manifer with, and accept the obligation	of Florida. Such change was autions of, Section 607.0505, Florida	horized by the corporations and statutes.	oration submits this statement for the purpon's board of directors. I hereby accept the	appointment as registered
SIGNATURE	Mulindad	asque M	ELINDA L.	VASQUEZ 7/8/	99
	Signature, typed or printed name of registered agent	and title if applicable (NOTE: R	egistered Agent signature required	d when reinstating) / AJA	11E
	OCCIOEDO ANE		49	ADDITIONS/CHANGES TO DEFICE	2S AND DIRECTORS IN 12
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	PD		1.1 TITLE PD	)	☐ Change ☐ Addition
TITLE NAME	PD VASQUEZ, MELINDA L	D DIRECTORS	1.1 TITLE PD 12 NAME VA	SQUEZ, MELINDA L	
TITLE	PD VASQUEZ, MELINDA L 2542 JARDIN	D DIRECTORS	1.1 TITLE PD 1.2 NAME VAS 1.3 STREET ADDRESS 275	SOUEZ, MELINDA L 542 JARDIN TERRACE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VASQUEZ, MELINDA L 2542 JARDIN WESTON FL 33327	D DIRECTORS DELETE	1.1 TITLE PD 12 NAME VA 1.3 STREET ADDRESS 2/5 1.4 CITY-ST-ZIP W	SQUEZ, MELINDA L 542 JARDIN TERRACE ESTON, FL 33327	☐ Change ☐ Addition (Accivess)
TITLE NAME STREET ADDRESS	PD VASQUEZ, MELINDA L 2542 JARDIN WESTON FL 33327 SDT	D DIRECTORS	1.1 TITLE PD 12 NAME VA 1.3 STREET ADDRESS 2/5 1.4 CITY-ST-ZIP W 2.1 TITLE SD	SQUEZ, MELINDA L 542 JARDIN TERRACE ESTON, FL 33327	☐ Change ☐ Addition (Activess)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VASQUEZ, MELINDA L 2542 JARDIN WESTON FL 33327 SDT VASQUEZ, LUIS F	D DIRECTORS DELETE	1.1 TITLE PD 12 NAME 1.3 STREET ADDRESS 2/5 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME  PD VA	SQUEZ, MELINDA L 542 JARDIN TERRACE ESTON, FL 33327 OT FOUEZ, LUIS F	☐ Change ☐ Addition (Accivess)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD VASQUEZ, MELINDA L 2542 JARDIN WESTON FL 33327 SDT VASQUEZ, LUIS F 2542 JARDIN	D DIRECTORS DELETE	1.1 TITLE PD 12 NAME 1.3 STREET ADDRESS 2/5 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME  PD VA	SQUEZ, MELINDA L 542 JARDIN TERRACE ESTON, FL 33327 OT FOUEZ, LUIS F	☐ Change ☐ Addition (Activess)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD VASQUEZ, MELINDA L 2542 JARDIN WESTON FL 33327 SDT VASQUEZ, LUIS F	D DIRECTORS DELETE	1.1 TITLE PD 12 NAME VA 1.3 STREET ADDRESS 21-3 1.4 CITY-ST-ZIP VV 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP VE	SQUEZ, MELINDA L 542 JARDIN TERRACE ESTON, FL 33327 OUEZ, LUIS F 542 JARDIN TERRACE 510N, FL, 33327	☐ Change ☐ Addition (Accivess)  ☐ Change ☐ Addition (Address)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD VASQUEZ, MELINDA L 2542 JARDIN WESTON FL 33327 SDT VASQUEZ, LUIS F 2542 JARDIN	D DIRECTORS DELETE	1.1 TITLE PD 12 NAME VA 1.3 STREET ADDRESS 21-5 1.4 CITY-ST-ZIP VV 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP VE 3.1 TITLE	SQUEZ, MELINDA L 542 JARDIN TERRACE ESTON, FL 33327 OT FOUEZ, LUIS F	☐ Change ☐ Addition (Accivess)  ☐ Change ☐ Addition (Address)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VASQUEZ, MELINDA L 2542 JARDIN WESTON FL 33327 SDT VASQUEZ, LUIS F 2542 JARDIN	D DIRECTORS DELETE	1.1 TITLE PD 12 NAME VA 1.3 STREET ADDRESS 21-3 1.4 CITY-ST-ZIP VV 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP VE	SQUEZ, MELINDA L 542 JARDIN TERRACE ESTON, FL 33327 OUEZ, LUIS F 542 JARDIN TERRACE 510N, FL, 33327	☐ Change ☐ Addition (Accivess)  ☐ Change ☐ Addition (Address)
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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 suppliemental 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 eddress, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP