

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004822

FILED
Jan 23, 2009
Secretary of State

Entity Name: MEDITERRANEAN DESIGNS, INC.

Current Principal Place of Business:

678 SHETTER AVE.
JACKSONVILLE BCH, FL 32250

New Principal Place of Business:

678 SHETTER AVENUE
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

678 SHETTER AVE.
JACKSONVILLE BCH, FL 32250

New Mailing Address:

678 SHETTER AVENUE
JACKSONVILLE BEACH, FL 32250

FEI Number: 59-3529870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAVA, DONNA
678 SHELTER AVE
JACKSONVILLE BCH, FL 32250 US

Name and Address of New Registered Agent:

FAVA, DONNA
678 SHETTER AVENUE
JACKSONVILLE BEACH, FL 32250 US

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: _____

01/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVPT () Delete
Name: FAVA, DONNA
Address: 229 PABLO ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: P () Delete
Name: FAVA, GIORGIO F
Address: 229 PABLO RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: FAVA, DONNA
Address: 229 PABLO ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONNA FAVA

VP

01/23/2009

Electronic Signature of Signing Officer or Director

Date