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 # P98000080081

1. Corporation Name REM DESIGN, INC.

May 10, 1999 8:00 am Secretary of State

05-10-1999 90147 007 ***150.00

Principal Place	e of Business		M	lailing Address							TÜİLİ OZILI BOLDI	101ti BB111 0810	1 10101 1101 1001
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HOLLYWOOD F					ļ	DO NOT WRITE IN THIS SPACE							
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									09/08/19	orated or Qualife 98	u		
2. Principal P	lace of Business		2a.	. Mailing Addres	ss				4. FEI Number	ī			pplied For
21			26									N	ot Applicable
Suite, Apt.	#, etc.			Suite, Apt. #,	etc.				5 Certificate of	f Status Desired			Additional
22			27						J. Germonic o			Fee R	equired
City & Stat	te		Ь	City & State						mpaign Financing	³ 🗆		May Be
23			28	7:-		Caunta				Contribution			to Fees
Zip	[Country		Zip	T	Country				ation owes the cu	irrent year int	angible □Yes	□No
24	25 Name and	I Address of Current	29 Pegis	etered Agent	30	<u>}}</u>			Personal Pr	Address of New	Registered		
	9. Name and	Address of Corrent	Negis	stered Agent		81	Name		To: Name and	7.00.000 0	g.o.o.	g	
REM	INGTON, TOD	D										· · · · · · · · · · · · · · · · · · ·	
	2 N. DIXIE HW					82	Street	Addres	s (P.O. Box Nun	nber is Not Acces	otable)		
HOL	LYWOOD FL 3	33020				83		 ,					
												, ,	·
						84	City				FL	85 Zip	Code
11. Pursuant	to the provisions	of Sections 607.0502	and 6	607.1508, Florida	a Statutes,	the above	e-namec	corpor	ation submits this	s statement for th	ne purpose of	changing its	s registered
office or r	registered agent.	or both, in the State of	f Florid	da. Such change	e was auth	orized by	the com	oration'	's board of direct	ors. I hereby acc	ept the appoi	ntment as re	egistered
agost a		and account the obligation	ane of	F Section 607 04	505 Florida		•						
		and accept the obligation	ons of	f, Section 607.05	505, Florida	a Statutes							
agent. I a SIGNATURE		and accept the obligation		_	505, Florida			required w	then reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE		
		·	and title	if applicable.	505, Florida				ADDITIONS/	CHANGES TO C	FFICERS AN		
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SIGNATURE		inted name of registered agent	and title	if applicable.	505, Florida (NOTE: Re	gistered Ager		PA	ADDITIONS/	MINGTOI	FFICERS AN		
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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 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 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 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 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 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of the corporation or the Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of the corporation or the Section 119.07(3)(i), Florida Statutes. I further certify that I am an officer or director of the corporation or the Section 119.07(3)(i), Florida Statutes. I further certify that I am an officer or director of the corporation or the Section 119.07(3)(i), Florida Statutes. I further certify that I am an officer or director of the corporation or the Section 119.07(3)(i), Florida Statutes. I further certification in the Section 119.07(3)(i), Florida Statutes. I

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

DIANE E. KEMINGTON