

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000082558

Entity Name: DESIGNER'S OUTLET, INC.

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

3042 NW 82ND AVE
DORAL, FL 33122

New Principal Place of Business:

Current Mailing Address:

3042 NW 82ND AVE
DORAL, FL 33122

New Mailing Address:

FEI Number: 65-0867908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARACHE, FORTUNATO
3042 NW 82ND AVE
DORAL, FL 33122 US

Name and Address of New Registered Agent:

RIVERA, PATRICIA C
3042 NW 82ND AVE
DORAL, FL 33122 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: PATRICIA RIVERA

03/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FARACHE, FORTUNATO
Address: 3042 NW 82ND AVE
City-St-Zip: DORAL, FL 33122

Title: VP (X) Delete
Name: RIVERA, PATRICIA
Address: 3042 NW 82ND AVE
City-St-Zip: DORAL, FL 33122

Title: VP (X) Delete
Name: FARACHE, ISAAC
Address: 3042 NW 82ND AVE
City-St-Zip: DORAL, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RIVERA, PATRICIA C
Address: 3042 NW 82ND AVE
City-St-Zip: DORAL, FL 33122

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

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: PATRICIA RIVERA

PD

03/09/2009

Electronic Signature of Signing Officer or Director

Date