

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 17, 1999 8:00 am**  
**Secretary of State**

03-17-1999 90136 018 \*\*\*150.00

DOCUMENT # P98000093528

1. Corporation Name

DESIGNS BY RONI LYNN, INC.



Principal Place of Business  
2300 GLADES ROAD STE 100E  
BOCA RATON FL 33431

Mailing Address  
2300 GLADES ROAD STE 100E  
BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

3. Date, Incorporated or Qualified

11/02/1998

4. FEI Number

05 0877053

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐\$5.00 May Be  
Added to Fees8. This corporation owes the current year intangible  
Personal Property Tax. ☐ Yes ☒ No

Name and Address of New Registered Agent

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

Country

9. Name and Address of Current Registered Agent

GREENBERG, JEFFREY L  
1761 W HILLSBORO BLVD STE 201  
DEERFIELD BEACH FL 33442

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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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 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 address, with all other like empowered.

SIGNATURE:

SIGNATURE OF RONI DOPPELT

Date

3/17/99

Daytime Phone #

272-1844

CR2E034 (11/98)