2000 UNIFORM BUSINESS REPORT (UBR) OCUMENT # P98000094135 PARTIES BY DESIGN CORP. rincipal Place of Business Mailing Address 21765 WESTMONT COURT WESTMONT COURT **BOCA RATON FL 33428-4817** - RATON FL 33428

3. Mailing Address

City & State

Suite, Apt. #, etc

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

NAME

NAME

TITLE NAME STREET ADDRESS

TITLE NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

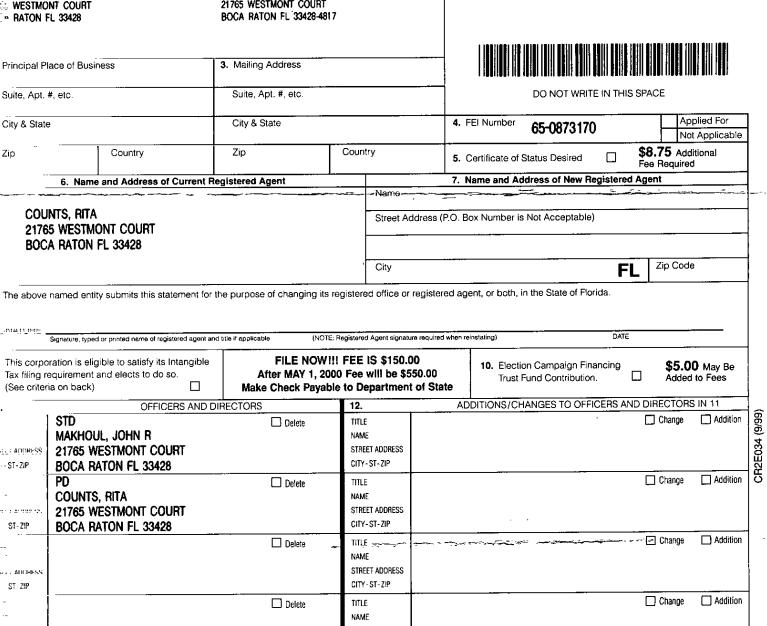
CITY-ST-ZIP

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FILED May 10, 2000 8:00 am Secretary of State

05-10-2000 90140 047 ***150.00



13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

Principal Place of Business

COUNTS, RITA

21765 WESTMONT COURT **BOCA RATON FL 33428**

9. This corporation is eligible to satisfy its Intangible

MAKHOUL, JOHN R

COUNTS, RITA

21765 WESTMONT COURT

21765 WESTMONT COURT

BOCA RATON FL 33428

BOCA RATON FL 33428

Tax filing requirement and elects to do so.

Country

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

Suite, Apt. #, etc.

City & State

ar_MAI UHE

..... ADDRESS

Anna Sangara

ST-ZIP

... ADDRESS

ST ZIP

..... LUDHEŞŞ

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(See criteria on back)

D TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Change

Change

☐ Addition

☐ Addition