**FILED** 

Jul 13, 1999 8:00 am Secretary of State

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). **PROFIT** 

CORPORATION ANNUAL REPORT 1999



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

07-13-1999 90013 032 \*\*\*550.00

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be

DOCUMENT #	<sup>‡</sup> P98000098879 <sub>v</sub>

FLORIDA DESIGN NETWORK, INC.

Principal Place of Business	Malling Address	1	
1/1 SW 12TH AVE.	777 SW 12TH AVE. POMPANO BCH FL 33069	DO NOT WRITE IN THIS SPACE	
		3. Date Incorporated or Qualified 11/24/1998	
2. Principal Place of Business	2s. Mailing Address 26	4 FEI Number 65-0892672	
Suite Aol. #. etc	Suite, Apt. #, etc.	\$8.7	

City & State

28

29

9. Name and Address of Current Registered Agent BRENNAN, HOWARD T 777 SW 12TH AVE.

POMPANO BCH FL 33069

25

Country

	Trust Fund Contribution Added to Fees
ry	8. This corporation owes the current year Intangible Personal Property. Yes No
_	10. Name and Address of New Registered Agent
1	Name
2	Street Address (P.O. Box Number is Not Acceptable)
3	
4	City 85 Zip Code

5." Election Campaign Financing

11. Pursuant to the provisions of sections 807.0502 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.

Count

SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable. (NOTE	Registered Agent eignature	e required when restrictating) . DATE
12.	OFFICERS AND DIRE	CTORS	13,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETÉ	1.1 TITLE	
NAME	BRENNAN, HOWARD T		1.2 NAME	18
STREET ADDRESS	777 SW 12TH AVE.		1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BCH FL 33069		1.4 CITY-ST-ZIP	
TITLE	D	DETELE	2.1 TITLE	Change Addition
NAME	CONNER, KENNETH M		2.2 NAME	
STREET ADDRESS	777 SW 12TH AVE.		2.3 STREET ADORESS	
City-ST-ZIP	POMPANO BCH FL 33069		2.4 CITY-ST-ZIP	
TITLE	D	DELETE	3.1 TITLE	Change Addition
NAME	PERRY, GEORGE		3.2 NAME	
STREET ADDRESS	777 SW 12TH AVE.		3.3 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·
CITY-ST-ZIP	POMPANO BCH FL 33069		3,4 CiTY-ST-ZIP	
TITLE	D	OELETE	4.1 TITLE	Change Addition
NAME	STONE, ROBERT		4.2 NAME	
STREET ADDRESS	777 SW 12TH AVE.		4 3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BCH FL 33069		4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME	}		5.2 NAME	
STREET ADORESS			5 3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	B.1 TITLE ·	Change Adoltion
NAME	1		6.2 NAME	
STREET ADDRESS	l		6.3 STREET ADDRESS	•
CITY-ST-ZIP	1		6.4 CITY-ST-ZIP	
14. I hereby c	ertify that the information supplied with this filin	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.

Daytime Phone #