

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000013759

FILED  
Jan 07, 2004  
Secretary of State

Entity Name: HIGH DESIGN UNIFORMS, CORP.

## Current Principal Place of Business:

1055 E 28TH ST  
HIALEAH, FL 33013

## New Principal Place of Business:

## Current Mailing Address:

1055 E 28TH ST  
HIALEAH, FL 33013

## New Mailing Address:

FEI Number: 65-0899272

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAFE, GUIRLANDE  
2408 NW 139TH AVE  
SUNRISE, FL 33323 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CAFE, GUIRLANDE  
Address: 2408 NW 139TH AVE.  
City-St-Zip: SUNRISE, FL 33323

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition  
Name: LEON, PAUL  
Address: 1055 EAST 28TH ST  
City-St-Zip: HIALEAH, FL 33013 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL LEON

VP

01/07/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date