2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000013759

FILED Feb 27, 2007 Secretary of State

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| Entity Name: HIGH DESIGN UNIFORMS, CORP. | |
| Current Principal Place of Business: | New Principal Place of Business: |
| 1055 E 28TH ST HIALEAH, FL 33013 | 1055 E 28TH ST HIALEAH, FL 33013 US |
| Current Mailing Address: | New Mailing Address: |
| 1055 E 28TH ST HIALEAH, FL 33013 | 1445 NE 145TH ST MIAMI, FL 33161 US |
| FEI Number: 65-0899272 FEI Number Applied For () FEI Nur | mber Not Applicable () Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | Name and Address of New Registered Agent: |
| LEON, PAUL 1055 E 28TH HIALEAH, FL 33013 US | LEON, HARRY 1445 NE 145TH ST MIAMI, FL 33161 US |
| The above named entity submits this statement for the purpose of in the State of Florida. | of changing its registered office or registered agent, or both, |
| SIGNATURE: HARRY LEON | 02/27/2007 |
| Electronic Signature of Registered Agent | Date |
| Election Campaign Financing Trust Fund Contribution (). | |
| OFFICERS AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |
| Title: P () Delete Name: LEON, PAUL Address: 1055 EAST 28TH ST City-St-Zip: HIALEAH, FL 33013 US | Title: P (X) Change () Addition Name: LEON, MARIE Address: 1443 NE 145TH ST City-St-Zip: MIAMI, FL 33161 US |
| Title: () Delete Name: Address: City-St-Zip: | Title: VP () Change (X) Addition Name: LEON, PAUL Address: 1443 NE 145TH ST City-St-Zip: MIAMI, FL 33161 US |
| Title: () Delete Name: Address: City-St-Zip: | Title: S () Change (X) Addition Name: LEON, MARIE Address: 1443 NE 145TH ST City-St-Zip: MIAMI, FL 33161 |

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL LEON VP 02/27/2007