


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000041264 1. Entity Name DESIGN2, INC. ARCHITECTURE & INTERIOR DESIGN	
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Principal Place of Business 306 EAST OAK AVENUE TAMPA, FL 33602	Mailing Address 306 EAST OAK AVENUE TAMPA, FL 33602
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DO NOT WRITE IN THIS SPACE

03282005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3585003	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HAMPTON, FEDERICK J 306 EAST OAK AVENUE TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **FREDERICK J. HAMPTON, PRESIDENT** **3-28-05**
Signature of, signed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

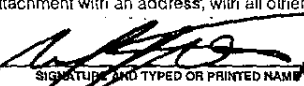
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE P	NAME HAMPTON, FEDERICK J
STREET ADDRESS 306 EAST OAK AVENUE	CITY-ST-ZIP TAMPA, FL 33602
TITLE ST	NAME JENNINGS, CARLENE M
STREET ADDRESS 306 EAST OAK AVENUE	CITY-ST-ZIP TAMPA, FL 33602
TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP
TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP
TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

UN0000343202
04/29/05-80085-018 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **FREDERICK J. HAMPTON, PRES.** **3-28-05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #