

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90076 047 ***150.00

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01182005 Chg-P CR2E034 (10/03)

DOCUMENT # P99000082009 1. Entity Name NARANJO DESIGN GROUP, INC.																											
Principal Place of Business 12860 S.W. 43RD DR. #139B MIAMI, FL 33175		Mailing Address 12860 S.W. 43RD DR. #139B MIAMI, FL 33175																									
2. Principal Place of Business 61 COLLINS AVE. Suite, Apt. #, etc. 502		3. Mailing Address 61 COLLINS AVE. Suite, Apt. #, etc. 502																									
City & State MIAMI BEACH FL Zip Country 33139		City & State MIAMI BEACH FL Zip Country 33139																									
4. FEI Number 65-0948218		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent NARANJO, ALVARO 12860 S.W. 43RD DR. #139B MIAMI, FL 33175		7. Name and Address of New Registered Agent Name NARANJO, ALVARO Street Address (P.O. Box Number is Not Acceptable) 61 COLLINS AVE #502 City MIAMI BEACH FL Zip Code 33139																									
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 <u>X</u> ALVARO NARANJO <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
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																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">DP</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>NARANJO, ALVARO</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>12860 S.W. 43RD DR. #139B</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33175</td> <td></td> </tr> </table>		TITLE	DP	<input type="checkbox"/> Delete	NAME	NARANJO, ALVARO		STREET ADDRESS	12860 S.W. 43RD DR. #139B		CITY-ST-ZIP	MIAMI, FL 33175		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">DP</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>NARANJO, ALVARO</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>61 COLLINS AVE. #502</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI BEACH, FL. 33139</td> <td></td> </tr> </table>		TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	NARANJO, ALVARO		STREET ADDRESS	61 COLLINS AVE. #502		CITY-ST-ZIP	MIAMI BEACH, FL. 33139	
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12. I hereby certify that the information supplied with this filing 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 reports 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: X		ALVARO NARANJO, PRES.																									
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small> 3/10/05 <small>Daytime Phone #</small>																									