## 2005 FOR PROFIT CORPORATION

## **FILED** ANNUAL REPORT Apr 19, 2005 08:00 AM Secretary of State DOCUMENT # P99000088076 1. Entity Name MARC-HENRI HECHT DESIGNS, INC. Mailing Address Principal Place of Business 2500 PARKVIEW DRIVE 2500 PARKVIEW DRIVE 2301 2301 HALLANDALE BEACH, FL 33009 HALLANDALE BEACH, FL 33009 No Chg-P CR2E034 (10/03) 01252005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0959143 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HECHT, MARC-HENRI DO NOT WRITE 20185 E. COUNTRY CLUB DRIVE, SUITE 2207 AVENTURA, FL 33180 \_ IN THIS SPACE 3. 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, typed or printed name of registered agent and little if applicable (NOTE, Registered Agent signature required when reinstalling) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees <del>64719705~80082~602</del> OFFICERS AND DIRECTORS 10. TITLE HECHT, MARC-HENRI NAME 20185 EAST COUNTRY CLUB DRIVE #2207 STREET ADDRESS AVENTURA, FL 33180 CITY-ST-ZIP TITLE NAME HOUBRE, MARIE PAULE 20185 EAST COUNTRY CLUB DRIVE #2207 STREET ADDRESS AVENTURA, FL 33180 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(ii), 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.

STREET ADDRESS CITY-ST-ZIP