

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000107002

Entity Name: DESIGN SYSTEMS, INC.

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7444 S.W. 47 AVENUE  
CORALGABLES, FL 33143 US

**New Principal Place of Business:**

**Current Mailing Address:**

7444 S.W. 47 AVENUE  
CORALGABLES, FL 33143 US

**New Mailing Address:**

FEI Number: 65-0976301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BREAKSTONE, ARTHUR  
7444 S.W. 47 AVE  
CORAL GABLES, FL 33143 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

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: BREAKSTONE, ARTHUR  
Address: 7444 S.W. 47 AVE.  
City-St-Zip: CORAL GABLES, FL 33143

I hereby 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 all other like empowered.

SIGNATURE: ARTHUR BREAKSTONE

PRES

04/28/2011

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

\_\_\_\_\_  
Date