

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 19 AM 11:10

DOCUMENT # S44891

(7)

1. Corporation Name

DESIGN COMMUNICATIONS, INC.

Principal Place of Business

48 NE 15 ST
2ND FL
HOMESTEAD FL 33030

Mailing Address

48 NE 15 ST
2ND FL
HOMESTEAD FL 33030

1427 SW 1st Ave
Ft. LAUDERDALE
33315

1427 S.W. 1st Ave
Ft. Lauderdale FL
33315

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/10/1991

3a. Date of Last Report

02/17/1994

4. FEI Number

65-0269521

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LYNN, JOHN M.
48 NE 15 ST
2ND FL
HOMESTEAD FL 33030

81 Name

Jung Nam

82 Street Address (P.O. Box Number is Not Acceptable)

1427 SW 1st Ave.

84 City

Ft. Lauderdale

FL

85 Zip Code

33315

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when resigning)

DATE

1/13/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PSD
ROLLARD, FORD
12461 SW 23rd TER
MIAMI FL

1.1 TITLE

P.S.D.

☐ Change ☒ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

1.2 NAME

JUNG NAM

1.3 STREET ADDRESS

1427 S.W. 1st Ave.

1.4 CITY - ST - ZIP

FT. LAUDERDALE, FL 33315

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature / Name

[Signature] 1/13/95 305-525-0684