2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# S72541

Entity Name: CARBI DESIGN, INC.

Current Principal Place of Business:

809 N DIXIE HWY
FRNT
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

809 N DIXIE HWY
FRNT
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 65-0287227 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMARAN & SHEFER, P.A.
2999 NE 191 ST
PH-8
AVENTURA, FL 33180 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CARBI, ALBERTO MIGUE, L
Address: 809 N DIXIE HWY FRNT
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DV ( ) Delete
Name: MAISON, R. MARCEL,
Address: 222 CHERRY LANE
City-St-Zip: PALM BEACH, FL 33480

Title: TS ( ) Delete
Name: MAISON, JOYCE
Address: 222 CHERRY LANE
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change ( ) Addition
Name: MAISON, R. MARCEL,
Address: 5200 N FLAGER DR
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TS (X) Change ( ) Addition
Name: MAISON, JOYCE
Address: 5200 N FLAGER DR
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOYCE F MAISON TS 01/05/2009

Electronic Signature of Signing Officer or Director Date