

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # **S75823** (2)
1. Corporation Name
LABBETT NORTH DESIGNS, INC.



Principal Place of Business 1121 E LAS OLAS BLVD FT LAUDERDALE FL 33301 US	Mailing Address 2100 S OCEAN LANE 1505 FT LAUDERDALE FL 33316 US
---	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 425 S. Olive Ave Suite, Apt. #, etc.		2a. Mailing Address 26 425 S. Olive Ave Suite, Apt. #, etc.		3. Date Incorporated or Qualified 08/26/1991	
22 City & State West Palm Beach, FL		27 City & State West Palm Beach, FL		4. FEI Number 65-0280596 Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
23 33401		28 33401		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 33401		29 33401		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 FL		30 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**LABBETT, DEREK
1121 E LAS OLAS BLVD
FT LAUDERDALE FL 33301**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	President
NAME	LABBETT, DEREK	1.2 NAME	Derek Labbett
STREET ADDRESS	25 HAYDEN STREET	1.3 STREET ADDRESS	425 S. Olive Ave
CITY-ST-ZIP	TORONTO, ONT.	1.4 CITY-ST-ZIP	W. Palm Beach Florida 33401
TITLE	ST	2.1 TITLE	
NAME	NORTH, ELAINE	2.2 NAME	
STREET ADDRESS	1211 E. LAS OLAS BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information furnished 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 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 a 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 in Block 14 if added, with an address.

SIGNATURE: _____
April 26 98 561-832-8999

CR2E034 (10/97)