

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S96471

FILED
Jan 10, 2006
Secretary of State

Entity Name: EXPRESSIONS IN DESIGN, INC.

Current Principal Place of Business:

3573 MERCANTILE AVE
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

3573 MERCANTILE AVE
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0297714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLDFIN, DIANE S
2426 DUCHESS CT
NAPLES, FL 34112 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: PDV () Delete
Name: OLDFIN, DIANE S
Address: 2426 DUCHESS CT
City-St-Zip: NAPLES, FL 34112 US

Title: D () Delete
Name: ANDERSON, MEGAN M
Address: 5953 49TH. AVE.
City-St-Zip: DELTA, BC V4K-4L4 CA

Title: TS () Delete
Name: FISCHL, SPENCER F
Address: 4697 25TH CT. SW
City-St-Zip: NAPLES, FL 34116

Title: D () Delete
Name: FISCHL, JASON R
Address: 188 E JAMES DRIVE
City-St-Zip: SIERRA VISTA, AZ 85635

Title: VP () Delete
Name: OLDFIN, JOHN G
Address: 2426 DUCHESS CT.
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ANDERSON, MEGAN M
Address: 5064 48TH. AVE
City-St-Zip: DELTA, BC V4K-1V8 CA

Title: TS (X) Change () Addition
Name: FISCHL, SPENCER F
Address: 3 ESTER STREET
City-St-Zip: NAPLES, FL 34104

Title: D (X) Change () Addition
Name: FISCHL, JASON R
Address: 3 ESTER STREET
City-St-Zip: NAPLES, FL 34104

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN G. OLDFIN

VP

01/10/2006

Electronic Signature of Signing Officer or Director

Date