

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 05, 2001 08:00 AM**
Secretary of State**DOCUMENT # V19970**1. Entity Name
DESIGNCO, INC.

Principal Place of Business

513 SOUTH 21ST AVE

HOLLYWOOD

33020

US

FL

Mailing Address

1431 FUNSTON ST

HOLLYWOOD

33020

US

FL

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

1120 PAPAYA STREET

Suite, Apt. #, etc.

City & State

City & State
HOLLYWOOD

FL

Zip

Country

Zip

Country

33019

US

4. FEI Number

65-0324378

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

VICNANSKY MANUEL
1431 FUNSTON ST

HOLLYWOOD

33020

US

FL

7. Name and Address of New Registered Agent

Name

VICNANSKY MANUEL

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

1120 PAPAYA STREET

City

HOLLYWOOD

FL

Zip Code

33019

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

03/05/2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> Delete
NAME	VICNANSKY IRINA	
STREET ADDRESS	1431 FUNSTON ST.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	VICNANSKY MANUEL	
STREET ADDRESS	1431 FUNSTON ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	VP	<input type="checkbox"/> Delete
NAME	VICNANSKY IRINA	
STREET ADDRESS	1431 FUNSTON ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	P	<input type="checkbox"/> Delete
NAME	VICNANSKY MANUEL	
STREET ADDRESS	1431 FUNSTON ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VICNANSKY IRINA	
STREET ADDRESS	1120 PAPAYA STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VICNANSKY MANUEL	
STREET ADDRESS	1120 PAPAYA STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VICNANSKY IRINA	
STREET ADDRESS	1120 PAPAYA STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VICNANSKY MANUEL	
STREET ADDRESS	1120 PAPAYA STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33019	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Manuel Vicnansky

P

03/05/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)