

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000077600

FILED
Apr 05, 2009
Secretary of State

Entity Name: DESIGN-MODE INC.

Current Principal Place of Business:

7345 35TH. COURT
VERO BEACH, FL 32967

New Principal Place of Business:

20 ORANGE AVE.
312
FORT PIERCE, FL 34950 SL

Current Mailing Address:

7345 35TH. COURT
VERO BEACH, FL 32967

New Mailing Address:

20 ORANGE AVE.
312
FORT PIERCE, FL 34950 SL

FEI Number: 26-0507175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WETHERALD, VIRGINIA CPA
3333 20TH. STREET
VERO BEACH, FL 32960 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: P () Delete
Name: WALLACE, LORRAINE
Address: 7345 35TH. COURT
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WALLACE, LORRAINE
Address: 20 ORANGE AVE.
City-St-Zip: FORT PIERCE, FL 34950 SL

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: LORRAINE WALLACE

PRES

04/05/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date