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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G88482 1. Corporation Name

SHERRY DUBOIS INTERIOR DESIGN, INC.

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Principal Place	of Business	Mailing Ad	ddress				ייייששיי י	. 9841 (9141 ;2)11 A.BO. ()		. 4.61. 2.21. 6.6 4.	• • • • • • • • • • • • • • • • • • • •	
9085 PERTH ROAD		9085 PERT	9085 PERTH ROAD									
			LAKE WORTH F 33467				DO NOT WRITE IN THIS SPACE					
						3. Date Incorp	orated or Qualifed			-		
							03/01/19				ì	
2 Principal Pla	ace of Business	2a. Mailin	g Address				4. FEI Numbe			· App	lied For	23
2. Principal Place of Business			26				59-23863	347		Not	Applicable	1
Suite, Apt. #, etc.			Suite, Apt. #, etc.					of Status Desired		\$8.75 A	ų.	13
22		27					• •			Fee Rec	<u> </u>	
City & State)	City &	& State				6. Election Ca	ampaign Financing	. 🗇	\$5.00	-	
23		28					Trust Fund	Contribution		Added to	Fees	
Zip	Country	Zip			untry			ration owes the cur	rent year	Intangible ☐ Yes	□No	
24	25	29		30	-			roperty Tax. Address of New	Panistera			
	9. Name and Address of Cu	urrent Registered A	Agent		81	Name	TU. Maille allu	Address of New	itegiste.	a Agont		
CADE	ERSON, ROGER G.	ē					· .	·				
	E 4TH AVE.				82	Street Addr	ress (P.O. Box Nu	mber is Not Accept	table)			
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	the distance of Spections 607	7.0502 and 607.150	98 Florida Statut	es the	above:	-named corp	poration submits th	is statement for the	e purpose	of changing its	registered	
	to the provisions of Sections 607 egistered agent, or both, in the S					-named corp	ooration submits th ion's board of direc	is statement for the ctors. I hereby acce	e purpose ept the app	of changing its pointment as reg	registered gistered——	
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14. 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 annual report or supplemental 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 the 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 on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

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