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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J82597

(2)

SPECIALTY MALL INTERIORS, INC.

1	ILLEL	J
Feb 05	1997	8:00am
Secret	tary o	of State

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Principal Plac	al Place of Business Mailing Address						r indeside unde imter erbat mitte titet taut dinte dinte dinte dinte dinte dinte ander ander ander				
% RUSSELL F. 2715 NORTH O ORLANDO FL	RANGE BLOSSOM TRAIL	27	RUSSELL F. BERGIN 15 NORTH ORANGE BI RLANDO FL 32601-4301		TRAIL						
OnDano II.	ew.	٠.					3. Date Incorporated or Qualified	1	3a. Date of Last Report		
			· · · · · · · · · · · · · · · · · · ·				07/15/1987	05/2	4/1996		
h	lace of Business	├ - -	Mailing Address				4. FEI Number		—	pplied For	
21		26	0 1 1 1 1				59-2905799	 	ot Applicable		
Suite, Apt	#. etc	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		4	Additional equired	
City & Stat	е		City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28					Trust Fund Contribution			to Fees	
Ζιρ	Country		Zip	Co	untry		8. This corporation has liability for			s. 199.032,	
24	25	29		30				Yes [
	9. Name and Address of Cu	rrent Regis	tered Agent		1		10. Name and Address of New Ro	gistered A	gent	· · · · · · · · · · · · · · · · · · ·	
BER	gin, Russell F.				81	Name					
271	5 North Orange Blossoi	M TRAIL			82	Street Ad	dress (P.O. Box Number is Not Accepta	ole)			
ORL	ANDO FL 32804										
					83						
					64	City			85 Zip	Code	
						•		FL			
11. Pursuant	to the provisions of Sections 607	.0502 and 6	07.1508, Florida Statu	utes, the	above	-named co	orporation submits this statement for the	ourpose of	changing	its registered	
agent. La	in familiar with, and accept the o	bligations a	Section 607.0505. F	lorida St	atuto s	the corpor	orporation submits this statement for the ration's board of directors. I hereby acce	ht trie aptv	JII HITTEIN AS	o registered	
SIGNATURE	Mossell	4/1	east								
						nt signature req	quired when reinstating)	DATE	····		
12.	OFFICERS	AND DIRE		13	_		ADDITIONS/CHANGES TO OFFI				
TITLE	P		L DELETE	\$.11	TITLE				Change	Addition	
NAME	BERGIN, RUSSELL F.			1.21	NAME						
STREET ADDRESS	2715 N ORANGE BLOSSOI	M TR		1.3 3	STREET	address					
CITY-ST-7IP	ORLANDO FL		,	_	CITY-S	T - ZIP		·· ·» ·····		<u> </u>	
TITLE	ST		☐ DELETE	2.1	TITLE				Change	Addition	
NAME	BERGIN, EILEEN			2.2	NAME						
STREET ADDRESS	2715 N ORANGE BLOSSO	M TR		2.3	STREET	ADDRESS					
CITY-ST-ZIP	ORLANDO FL				CITY-5	T-ZIP		·			
TITLE	VP .		☐ DELETE	3.1	TITLE				Change	Addition	
NAME	BERGIN, WILLIAM J.				NAME						
\$18EET ADDRESS	2715 N ORANGE BLOSSO	M TR		3.3	STREET	ADDRESS					
CITY-ST-ZIP	ORLANDO FL		T oc. car		CITY-S	I - Z#P				1100	
TITLE			☐ DELETE		TITLE				Change	Addition	
NAME	ļ			4. 2	NAME	-					
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP					CITY-S	T-ZIP	······································				
TITLE			☐ DELETE		TITLE	-			Change	Addition	
NAME				5.2	NAME						
STREET ADDRESS				5.3	STREET	ADDRESS					
CiTY+S1+ZiP					CITY - S	T-ZIP					
TITLE			DELETE	6.1	TITLE				L Change	Addition	
NAME				6.2	NAME].					
STREET ADDRESS				6.3	STREET	ADDRESS					
City-SY-ZIP				6.4	CITY-S	T-ZIP					
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4. I do 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 this 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.

SIGNATURE:

CONTANTE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-97 407-841-0292

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