

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L47929

FILED
Jan 11, 2005
Secretary of State

Entity Name: LIBRARY INTERIORS OF FLORIDA, INC.

Current Principal Place of Business:

2111 E MICHIGAN ST
SUITE 139
ORLANDO, FL 32806 US

New Principal Place of Business:

7345 W. SANDLAKE ROAD
SUITE 217
ORLANDO, FL 32819 US

Current Mailing Address:

2801 DIVISION ST
METAIRIE, LA 70002 US

New Mailing Address:

FEI Number: 58-1877256 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EKBLAD, HOWARD J
764 EDISON RD
AUBURNDALE, FL 33823 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: D () Delete
Name: EKBLAD, HOWARD J.,
Address: 764 EDISON RD
City-St-Zip: AUBURNDALE, FL

Title: PST () Delete
Name: EKBLAD, HOWARD J.,
Address: 764 EDISON DR
City-St-Zip: AUBURNDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 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: HOWARD J. EKBLAD

D

01/11/2005

Electronic Signature of Signing Officer or Director

_____ Date