

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

FILED

**May 15 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M04235 (1)

1. Corporation Name
G & F INTERIOR DESIGN, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**500 E. BROWARD BLVD.
STE #920
FT. LAUDERDALE FL 33394
US**

Mailing Address
**500 E. BROWARD BLVD.
STE #920
FT. LAUDERDALE FL 33394
US**

3. Date Incorporated or Qualified
08/21/1984

2. Principal Place of Business
21 983 N. NOB Hill RD
Suite, Apt. #, etc.

22 City & State
23 PLANTATION, FL
Zip
24 33324

25 Country
25 US

2a. Mailing Address
26 983 N. NOB Hill RD.
Suite, Apt. #, etc.

27 City & State
28 PLANTATION, FL
Zip
29 33324

30 Country
30 US

4. FEI Number
59-2470832

Applied For
 Applied For
 Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**MARULANDA, CARLOS A
500 E. BROWARD BLVD.
STE #920
FT. LAUDERDALE FL 33394**

10. Name and Address of New Registered Agent

81 Name **MARULANDA, CARLOS A.**

82 Street Address (P.O. Box Number is Not Acceptable)
983 N. NOB Hill RD.

83

84 City **PLANTATION** FL 85 **33324**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Carlos Marulanda y.P.* **04-28-98.**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DO	<input type="checkbox"/> DELETE
NAME	MARULANDA, CARLOS	
STREET ADDRESS	688 STANTON DRIVE	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	DO	<input type="checkbox"/> DELETE
NAME	MARULANDA, CESAR A	
STREET ADDRESS	694 STANTON DR	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	DO	<input type="checkbox"/> DELETE
NAME	MARULANDA, PABLO A	
STREET ADDRESS	2556 JARDIN LANE	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	DO	<input type="checkbox"/> DELETE
NAME	MARULANDA, EDGAR A	
STREET ADDRESS	812 SAND CREEK CIRCLE	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	983 N. NOB HILL RD.
1.4 CITY-ST-ZIP	PLANTATION, FL 33324
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	983 N. NOB HILL RD.
2.4 CITY-ST-ZIP	PLANTATION, FL 33324
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	983 N. NOB HILL RD.
3.4 CITY-ST-ZIP	PLANTATION, FL 33324
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	983 N. NOB HILL RD.
4.4 CITY-ST-ZIP	PLANTATION, FL 33324
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

CF2E034 (10/97)