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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 30 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M64687

(0)

INTERIOR WOMEN, INC.

CITY-ST-ZIP

SIGNATURE:

Principal Place of Business Mailing Address 7320 SW 18 STREET 7320 SW 18 STREET PLANTATION FL 33317 PLANTATION FL 33317-4913								
								3. Date Incorporated or Qualified
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For
21				26				65-0025823 Not Applicable
Surte, Apt. #, etc				Suite. Apt. #, etc.				5. Certificate of Status Desired Fee Required Fee Required
City & State				City & State				6. Election Campaign Financing \$5.00 May Be
23			28	}				Trust Fund Contribution
Zip				Zip Country			,	8. This corporation has liability for intangible tax under s. 199.032,
24		25	29		30			Florida Statutes Yes No
		and Address of Curre	nt Regist	ered Agent		-		10. Name and Address of New Registered Agent
	ss, suzan					81	Name	
7320 SW 18 STREET				82 Street Ad			Street A	Address (P.O. Box Number is Not Acceptable)
PLAI	NTATIOON	FL 33317				83		
						83		
						84	City	FL 85 Zip Code
11 Purcuant t	to the provin	ions of Spotions 607 05	02 and 60	17 1508 Florida Statu	tos the	abov	e-named (corporation submits this statement for the purpose of changing its registered
office or re	egistered ag	ent or both, in the Stat	e of Florid	a. Such change was	authoriz	ed by	the corp	poration's board of directors. I hereby accept the appointment as registered
	m fam har wi	in, and accept the obliq	gations of,	Section 607.0505, Fi	iorioa Si	atute	S.	ı
SIGNATURE	Stanature typed	or printed name of registers dia-	nent and tile i	fapolicable (NO	TE Registe	red Age	ent signature	required when reinstaling) DATE
12.		OFFICERS AT			13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST			☐ DELETE	1.1	TITLE		☐ Change ☐ Addition
NAME		SUZANNE R			1.2	NAME	ſ	
STREET ADDRESS		18 STREET			1.3	STREET	ADDRESS	
CITY-ST-ZIP	PLANTA	TON FL 33317			1.4	CITY-S	ST- ZIP	
TITLE				☐ DELETE	2.1	TITLE		Change L Addition
NAME					2.2	NAME		
					2.3	STREET	I ADDRESS	
CITY - ST - ZIP				Dr. coc	_		ST - ZIP	Change L Addition
TITLE				☐ DELETE		TITLE		Change Addition
NAME						NAME		
STREET ADDRESS							T ADDRESS	
DITY - ST - ZIP				DELETE		CITY-	ST-ZIP	Change Addition
THTLE				- beeck		NAME		La Grange La Rounett
NAME PERCET ADDRESS							T ADDRESS	
STREET ADDRESS					1		ST-ZIP	
C:TY - ST - 7IP				☐ DELETE		TITLE	ψ1-±0	Change Addition
NAME				•		NAME		
STREET ADDRESS	}				- 1		T ADDRESS	
CITY-ST-7IP							ST-ZIP	
TITLE				DELETE		TITLE		Change Addition
NAME					6.2	NAME		
STREET ADDRESS					6.3	STREE	T ADDRESS	

6.4 CITY - ST - ZIP

14. 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 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 of 5100, 13 if changed, or on an attachment with an address.