2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 8:00 am Secretary of State

DOCUMENT # P0400012238 1. Entity Name					05-02-2005 90499 037 ***150.00			
INTERIOR SOLUTIONS OF FORT LAUDERDALE, INC.								
Principal Place	e of Business	Mailing Address				LUUJJU	,01	
	GTON PL #102 ORS, FL 33305-3914	663 KENSINGTON PL # WILTON MANORS, FL 3		914	4 18941891 14		· PRIŠI 17812 (1812 skáž 1174) sk	11 64 1 (1-14 6 1
2. Principal Pl 1767 NW	lace of Business 7 37th Street	3. Mailing Address 1767 NW 37th	Stre	et				
Suite, Apt.		Suite, Apt. #, etc.			04202005	Chg-P	CR2E034 (10/03)	
Oakland Park, FL			Oakland Park, FL		4. FEI Numb			pplied For at Applicable
Zip 33309 -5	Country USA	Zip 33309-5819	Count USA	•	5. Certificate	of Status Desired	\$8.75 Add	
33307.3	6. Name and Address of Curren		00.			Address of New R		
LITTLE MA	AVNE D			Name Littl	e. Wavne	D.		
LITTLE, WAYNE D 663 KENSINGTON PL #102 WILTON MANORS, FL 33305-3914				Name Little, Wayne D. Street Address (P.O. Box Number is Not Acceptable) 1767 NW 37th Street				
				City Oakla	nd Park		FL 333309	°-5819
8. 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. I am familiar with, and accept the obligations of registered agent.								
_	rons of registered agent.						1./20/05	
SIGNATURE 4/28/05 Signature, tyled or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
Olorevione2		at and little if applicable (NOTE	: Registered	Agent signature require	ed when reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE	
FÜLI	Signature. Typed or printed name of registered ager E NOWIII FEE IS \$150.00 ay 1, 2005 Fee will be \$550	9. Election Campaig	gn Finan	cing \$5	5.00 May Be ded to Fees		DATE	-
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indicated on this report or supplied with first litting does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliermental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mayne D. Little, Pres.	4/28/05 (954)	735-1710
SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #