

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 SEP 22 AM 8:15

DOCUMENT # P04000146743 1. Entity Name INTERIOR & EXTERIOR SOLUTIONS, INC					
Principal Place of Business 639 GULL DRIVE KISSIMMEE, FL 34759			Mailing Address 429 ACACIA TREE WAY KISSIMMEE, FL 34758		
2. Principal Place of Business		3. Mailing Address 639 GULL DRIVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Kissimmee, FL			
Zip	Country	Zip 34759	Country	4. FEI Number 86120299	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DELVALLE, DAVID 639 GULL DRIVE KISSIMMEE, FL 34759			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!! FEE IS \$150.00 Due by October 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELVALLE, DAVID 639 GULL DRIVE KISSIMMEE, FL 34759	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D DELVALLE, DAVID 639 GULL DRIVE KISSIMMEE, FL 34759	☒ Change ☐ Ad
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Ad	☐ Change ☐ Ad	

12. 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 report or supplemental 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 changed, or on an attachment with an address, with all other like empowered.

David Delvalle
DAVID DELVALLE

P/D

9/16/05