FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000009906 (6)**

1. Corporation Name

THERESA CAROLLO INTERIORS, INC.

Principal Place of Business	Mailing Address
853 VANDERBILT BEACH RD. SUITE 305 NAPLES FL 33963	853 VANDERBILT BEACH RD. SUITE 305 NAPLES FL 33963

3. Date Incorporated or Qualified: **02/01/1994**
3a. Date of Last Report: **03/30/1995**

4. FEI Number: **65-0463504** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business — 21 | 22 State, Apt. #, etc. | 23 City & State | 24 Zip | 25 County

2a. Mailing Address — 26 | 27 State, Apt. #, etc. | 28 City & State | 29 Zip | 30 Country

9. Name and Address of Current Registered Agent

AUSTIN, ARLENE F
1250 ~~2000~~ TAMIAMI TRAIL NORTH
SUITE ~~270~~ 302
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.1005 and 617.1905, 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 _____ (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1 TITLE	☐ Change ☐ Addition
NAME	CAROLLO, THERESA	1 NAME	
STREET ADDRESS	783 TRAMORE LANE	1 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33963	1 CITY-ST-ZIP	
TITLE	D	2 TITLE	☐ Change ☐ Addition
NAME	CAROLLO, THOMAS	2 NAME	
STREET ADDRESS	783 TRAMORE LANE	2 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33963	2 CITY-ST-ZIP	
TITLE	☐ DELETE	3 TITLE	☐ Change ☐ Addition
NAME		3 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		3 CITY-ST-ZIP	
TITLE	☐ DELETE	4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE	☐ DELETE	5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE	☐ DELETE	6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this report is voluntarily furnished and 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 added by amendment with an effective date.

SIGNATURE: THERESA CAROLLO Theresa Carollo 2-1-96 941 591 2060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (DATE) (TELEPHONE NUMBER)

CR2E034 (12/95)