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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000046433 (4)**1. Corporation Name

VICKY ANDREWS INTERIORS, INC.

FILED Mar 07 1997 8:00am Secretary of State



	(P)	11.11				!			A 1111 H K1
Principal Place of Business Mailing Address AVEC DIS PEND DOAD									
27526 BIG BEND BONITA SPRINGS		27526 BIG BEND ROAD BONITA SPRINGS FL 3413	4-3937						
						Date Incorporated or Qualified 5/24/1996	3a. Date	e of Last R	leport
	ace of Business	2a. Mailing Address			4.	FEI Number		_]Aı	pplied For
1 10931	1 K-NINE DR.	26			6	5-0684454		N	ot Applicable
Suite, Apt. #		Suite, Apt. #, etc. 27 City & State 28			5.	5. Certificate of Status Desired S8.75 Addit Fee Require 6. Election Campaign Financing Trust Fund Contribution S5.00 May Added to Fe			
City & State Bonite	·								
Zip 4 3413	Country 25 25	Zip 29	Count	ry] Yes 📋	No	199.032,
	9. Name and Address of Curren	it Registered Agent			10.	Name and Address of New Re	egistered A	gent	
	PHREVILLE, JOHN D]8	1 Narr	10				
4501 TAMIAMI TRAIL NORTH STE 300 NAPLES FL 33940-3060				2 Stree	et Address (P.	O. Box Number is Not Accepta	ble)		
NAPLI	ES FL 33940-3000		8	3			· · · · · · · · · · · · · · · · · · ·		
			8	4 City			FL	85 Zip	Code
11. Pursuant to	o the provisions of Sections 607.050 egistered agent for both, in the State	2 and 607.1508, Florida Statu	tes, the abo	ve-nam	ed corporation	submits this statement for the		hanging i	its registered
office or re agent. Fair	eg-stered agent, or both, in the State ri familiar with, and accept the obligi	of Florida. Such change was ations of, Section 607.0505, Fl	authorized orida Statul	by the c es.	orporation's bo	oard of directors. I hereby acce	pt the appoi	ntment as	registered
SIGNATURE _									
12.	Signature: typed or penied minic of registered ago OFFICERS AN		IE Registered /	gent signa	ture required when i	reinstaling) ADDITIONS/CHANGES TO OFFI	DATE CEDS AND	DIRECTO	DC (N. 12
	D OFFICE NO ANI	DELETE	1 1 TITU	:	Sec/			Change	Addition
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14. If 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 or Block 13 if changed, or organ attachment with an address.

SIGNATURE:

WEY DE DENTITED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/97 941-947-1791