2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P98000073645 02-28-2005 90183 017 ***158.75 1. Entity Name SIMMONS & SARAY INTERIORS GROUP, INC. Mailing Address Principal Place of Business 1090 JUPITER PK DR 1090 JUPITER PK DR STE 201 STE 201 JUPITER, FL 33458 JUPITER, FL 33458 2. Principal Place of Business 3. Mailing Adgress Suite, Apt. #, etc. Suite, Apt. #, etc 02222005 CR2E034 (10/03) Cha-P Applied For City & State City & State 4. FEI Number 65-0859205 Not Applicable . Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SIMMONS, LAUREN R Street Address (P.O. Box Number is Not Acceptable) 1090 JUPITER PK DR STE 201 JUPITER, FL 33458 City Zip Code B. The above named grifty 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees HANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE A Change TITLE Delete auren Ri PK.Dr., Ste. 201 SIMMONS, LAUREN R NAME STREET ADDRESS 1090 JUPITER PK DR STE 201 STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition HALAE SIMMONS, LAUREN R HAME STREET ADDRESS STREET ADDRESS 1090 JUPITER PK DR STE 201 CITY-ST-ZIP JUPITER, FL 33458 CITY-ST-7IP Change **Addition** TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition HAME NAME STREET ADDRESS STREET ADDRESS CHY+ST-ZIP CHY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information peoplied 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 of 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 w

SIGNATURE:

FILED Feb 28, 2005 8:00 am

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#198000073645 CORPORATE RESOLUTION

THE UNDERSIGNED, being the Secretary of, SIMMONS & SARAY INTERIORS GROUP, INC., a Florida corporation, (the "Corporation") hereby certifies that:

- 1. The Corporation is a duly formed, validly existing corporation in good standing under the laws of the State of Florida and is authorized to transact business in the State of Florida.
- 2. At a special meeting of the Board of Directors of the Corporation duly and regularly held in accordance with its By-Laws on January 25, 2005, at which the sole director, LAUREN R. SIMMONS was present and voting, the following resolutions were adopted and the same have not been revoked, canceled, annulled or amended in any manner and are in full force and effect on the date hereof:

BE IT RESOLVED, that, subject to a change being made at the next annual meeting of the Corporation, LAUREN R. SIMMONS shall be the President, Secretary, and Treasurer of the Corporation; and

FURTHER RESOLVED, that, subject to the By-Laws of the Corporation, JULIE LUXTON shall be the Vice President of the Corporation.

IN WITNESS WHEREOF, the undersigned has hereunto set her hand and affixed the Corporation's seal this $\frac{17}{2}$ day of February, 2005.

[CORPORATE SEAL]

LAUREN R. SIMMONS, SECRETARY
OF SIMMONS & SARAY INTERIORS
GROUP, INC.

STATE OF FLORIDA COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, on this day, personally appeared LAUREN R. SIMMONS, as Secretary of SIMMONS & SARAY INTERIORS GROUP, INC., a Florida corporation, who is personally known to me, or has produced ________ as identification, who, being by me first duly sworn and cautioned, acknowledged, deposed and otherwise stated that she executed the foregoing instrument.

SWORN TO and SUBSCRIBED before me this / day of February, 2005.

Notary Public

My commission expires:

Printed Name of Notary

Bernie Raymond
Commission # DD353334
Expires September 8, 2008
Bonded Troy Felly Industrial Industrial