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

FILED Feb 10 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** V42811 (2)INTERIOR DESIGN DIRECTORY, INC. Principal Place of Business Mailing Address 1011 SE 9TH AVE 1011 SE 9TH AVE POMPANO BCH FL 33060 POMPANO BCH FL 33060 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/10/1992 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65-0347672 21 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Zio Country 8. This corporation owes or has paid the current year Intangible Yes □ Ño 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Bi Name BAUMHAFT, ANN 1011 SE 9TH AVE Street Address (P.O. Box Number is Not Acceptable) **B2** POMPANO BEACH FL 33060 83 84 City Zip Code Pursuant to the provisions of Sections 607 0502 and 607.1508, 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE. Storabile, typed or seroted have of registered accest and title if upply able (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change TITLE 1.1 TITLE BAUMHAFT, ANN NAME 1.2 NAME 1011 SE 9TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL CITY - ST - ZIP 1.4 CITY - ST - ZIP Change DELETE Addition TITLE 2.1 TITLE **BAUMHAFT, IRWIN** 2.2 NAME NAME 1011 SE 9TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS POMPANO BEACH FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-\$1-ZIP DELETE ☐ Change Addition TITLE 5.1 THLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP

SIGNATURE:

DELETE

61 TITLE

62 NAME

63 STREET ADDRESS 64 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 13 if charged, or on an attachging with an address.

CITY - ST - 7IP

STREET ADDRESS

TITLE

NAME

Change

Addition