

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90677 017 ***150.00

DOCUMENT # 515190	
1. Entity Name ANITA MARGOLIS INTERIOR DESIGN, INC.	



Principal Place of Business 221 ARAGON AVE #201 CORAL GABLES FL 33134 US	Mailing Address 221 ARAGON AVE #201 CORAL GABLES FL 33134 US
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2. Principal Place of Business 1541 BRICKELL AVE Suite, Apt. #, etc. #2005 City & State MIAMI, FLORIDA Zip 33129 Country USA	3. Mailing Address 1541 BRICKELL AVE Suite, Apt. #, etc. #2005 City & State MIAMI, FLORIDA Zip 33129 Country USA
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MOORE CR2E034 (11/03)

4. FEI Number 59-1712428		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent MARGOLIS, ANITA 1541 BRICKELL AVE #2005 MIAMI FL 33129		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 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MARGOLIS, ANITA 1541 BRICKELL AVE. #2005 MIAMI FL 33129 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARGOLIS, HERBERT G. 1541 BRICKELL AVE. #2005 MIAMI FL 33129 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Anita Margolis* **ANITA MARGOLIS** 4/9/04 (305) 857-3500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

515190

ANITA
MARGOLIS
INTERIOR
DESIGN
INC.



AS OF 1/30/04, MY NEW ADDRESS, PHONE NUMBER, FAX NUMBER
AND E MAIL WILL BE AS FOLLOWS:

ANITA MARGOLIS INTERIOR DESIGN, INC.
1541 BRICKELL AVENUE
SUITE # 2005
MIAMI, FLORIDA 33129

PHONE (305) 857 - 3500
FAX (305) 858 - 3600
EMAIL anitamargolis@aol.com