

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000049541

FILED
Jan 20, 2009
Secretary of State

Entity Name: DOMAIN INTERIORS INC.

Current Principal Place of Business:

4001 N. OCEAN BOULEVARD
502 B
BOCA RATON, FL 33431

New Principal Place of Business:

7917 SW JACK JAMES DR.
STE. 2
STUART, FL 34997

Current Mailing Address:

4001 N. OCEAN BOULEVARD
502 B
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-8912304 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SENOFONTE, THOMAS
4001 N. OCEAN BOULEVARD
502 B
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SONOFONTE, THOMAS
Address: 4001 N. OCEAN BOULEVARD #502 B
City-St-Zip: BOCA RATON, FL 33431

Title: VP () Delete
Name: SONOFONTE, KATHLEEN
Address: 4001 N. OCEAN BOULEVARD #502 B
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SONOFONTE, THOMAS
Address: 4001 N. OCEAN BOULEVARD #502 B
City-St-Zip: BOCA RATON, FL 33431

Title: P (X) Change () Addition
Name: SONOFONTE, KATHLEEN
Address: 4001 N. OCEAN BOULEVARD #502 B
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS SENOFONTE

VP

01/20/2009

Electronic Signature of Signing Officer or Director

_____ Date