FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 239646 (3) 1. Corporation Name												
TULANI	E KIDD INTERIORS, INC.						1 12 11 10 11 11 11 11 11 11 11 11 11 11 11				1811 BHEIL 1881	
Principal Place	Mailing Address											
2263 N.W. 2ND AVENUE			2263 N.W. 2ND AVENUE									
STE 101 BOCA RATON	I FL 33432		STE 101 BOCA RATON FL 3343;	2			****	· · · · · · · · ·				,
							3. Date Incorporated or Qualified 08/01/1960	3a.	Date of La:		•	
2. Principal Place of Business			2a. Maiing Address				4. FEI Number	<u> </u>	101 (40		pplied For	-
21			6				59-0931784			Ī	lot Applicable	
Suite, Apt. #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired		,		Additional	
City & State			Oity & State				6. Election Campaign Financing				May Be	
23							Trust Fund Contribution				to Fees	
Zip Country			Zip Cour				8. This corporation has liability for i	-		er s	199.032,	7
24	25 9. Name and Address of Curren	29 L Begin	stered Agent	30	Γ		Florida Statutes Yes 10. Name and Address of New R					
	<u> </u>		ototea Agent		81	Name	10, Hame and Address of New N	ogist	ereu Agent			
KIDD JR,	TULANE				82	Street Addr	ess (P.O. Box Number is Not Acceptab	le!				
2011 N E 30 STREET						otroot riodir						╛
LIGHTHO	OUSE POINT FL 33064				83							
					84	City			FL 85	Ζıρ	Code	~
11. Pursuant to	o the provisions of Sections 607.0502	and 60	07.1508, Florida Statute	es, the abo	L	ramed corpor	ation submits this statement for the pur	pose	of changing	its re	gistered office	-
or registere	ed agent, or both, in the State of Floric h, and accept the obligations of, Sect-	Ja Suc	h change was authorize	ed by the i	corp	oration's boar	d of airectors. Thereby accept the appoint	Sintme	ent as registe	ered .	agent Lam	
SIGNATURE												
12.	Styristing type for profed have of register ragic (OFFICERS AND			16 hoj 4000 13.	A.h.	1.5 part of response	ADDITIONS/CHANGES TO OFF		AND DIREC	CLOE	RS IN 12	- 66
TITLE	PD		☐ DELETE		ITLE	T			☐ Char		Addition	CR2E034 (12/95)
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NAME				32 N.	AME.							
STREET ADDRESS						ADDRESS						
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NAME				42 N					Onar	go	☐ Addition	
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NAME			The process	62 N						A	LI MUUITION	
STREET ADDRESS				- 6		ADDRESS						
CITY-S1-7IP				5.4 C	*Y - S	1.70						
14. I do hereby	cert by that the information supplied v	vith this	s filing is voluntarily furni	ished and	doe:	sinot qualify fo	or the exemption stated in Section 119.0	07(3)(d). Florida St	atute	s. I further	7

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature snall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted 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 on an attachment with an address.

SIGNATURE:

MANATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96 407 395-2848