

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Barbara A. Mathew
Secretary of State
Tallahassee, FL 32399-0001

DOCUMENT # **399802**

(8)

To: Corporation Name

BLAIR HOUSE INTERIORS, INC.

Principal Place of Business

**650 N E 44 ST
FT LAUDERDALE FL 33334**

Mailing Address

**650 N E 44 ST
FT LAUDERDALE FL 33334**

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated or qualified 04/21/1972	3a. Date of Last Report 10/06/1994
4. FFI Number 59-1398299	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has submitted for filing the tax return for 1994. Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
22	27
23	28
24	29
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VECCHIO, JOSEPH A
2929 EAST COMMERCIAL BLVD. SUITE A
FT. LAUDERDALE FL 33308**

81. Name	85. Zip Code
82. Street Address (P.O. Box Number, Post Office Station)	
83.	
84. City	FL

11. I, the undersigned, do hereby certify that the foregoing information is true and correct to the best of my knowledge and belief, and that I am duly qualified to act as a registered agent for the corporation named herein. I am duly qualified to act as a registered agent for the corporation named herein.

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

NAME	DP
ADDRESS	EBERHART, KENNETH W
CITY	7444 MANDARIN DRIVE
STATE	BOCA RATON FL
ZIP	VD
NAME	EBERHART, DOROTHY A
ADDRESS	7444 MANDARIN DRIVE
CITY	BOCA RATON FL
STATE	
ZIP	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

NAME	23274 TORRE CIRCLE
ADDRESS	BOCA RATON, FL 33433
CITY	
STATE	
ZIP	
NAME	23274 TORRE CIRCLE
ADDRESS	BOCA RATON, FL 33433
CITY	
STATE	
ZIP	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	

14. I, the undersigned, do hereby certify that the information supplied with this filing is true and correct to the best of my knowledge and belief, and that I am duly qualified to act as a registered agent for the corporation named herein. I am duly qualified to act as a registered agent for the corporation named herein.

SIGNATURE:

Joseph A. Vecchio
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95 306-513 2149