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

**PROFIT** CORPORATION ANNUAL REPORT

1997

CITY-ST-7P



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 07 1997 8:00am

Secretary of State

(96/6)

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 399802

(8)

BLAIR HOUSE INTERIORS, INC.

Principal Place of Business Mailing Address 650 N E 44 ST 650 N E 44 ST FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334-3149 3. Date Incorporated or Qualified 3a. Date of Last Report 04/21/1972 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-1398299 26 Not Applicable Suite. Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VECCHIO, JOSEPH A 2929 EAST COMMERCIAL BLVD. SUITE A 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33308 83 Zip Code 11. 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 11 TITLE Addition EBERHART, KENNETH W NAME 1.2 NAME 23274 TORRE CIRCLE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CiTY-ST-ZiP VD TITLE DELETE 2.1 TITLE ☐ Change ■ Addition EBERHART, DOROTHY A 2.2 NAME 23274 TORRE CIRCLE STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** City-St-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-71P 5.4 CITY-ST-ZIP THILE DELETE 61 TITLE Addition 62 NAME STREET ADDRESS

**63 STREET ADDRESS** 

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64 CiTY-ST-ZIP 14. I do 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 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 12 or Block 13 if changed, or on an attachment with an address.