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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 399802

(8)

**BLAIR HOUSE INTERIORS, INC.** 

FILED Mar 31 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								
650 N E 44 ST FT LAUDERDALE FL 33334		650 N E 44 ST FT LAUDERDALE FL 33334						
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 04/21/1972		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-1398299		Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	├ <b>┐</b> ' '			5. Certificate of Status Desired		Additional
22		27	h			UI Common of Charles	Fee	Required
<del></del> -	City & State					6. Election Campaign Financing		O May Be
23		[28]	Z <sub>ID</sub> Country			Trust Fund Contribution		d to Fees
Zip	Country	Ζφ	ι ˙ —¬ ˙ ˙ ΄			8. This corporation owes or has paid the current year Intangible		
24	9, Name and Address of Curre		30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
1		in registered Agent		81 N	lame	10. Name and Address of New Reg	Istaled Wight	-
	CCHIO, JOSEPH A	DINTE A						j
2929 EAST COMMERCIAL BLVD. SUITE A				<b>82</b> S	treet Addre	ess (P.O. Box Number is Not Acceptable	e)	
FT. LAUDERDALE FL 33308				83				
				٠-				
			- 1		City			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, a 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 familier with and accept the appointment as registered segment. I am familier with and accept the appointment as registered agent. I am familier with and accept the appointment as registered agent.								
SIGNATURE Stylend or printed nature of registrated prints and little if application (NOTE: Registered Agent's signature required when reinstainin)  DATE								
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	DRS IN 12
TITLE	DP DELETE		1.1 717	1.1 TITLE			Change	Addition
NAME	EBERHART, KENNETH W		1.2 NA	ME				
STREET ADDRESS	23274 TORRE CIRCLE		1.3 ST	1.3 STREET ADDRESS				ľ
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-ST-ZIP				
TITLE	VO □ DELETE			2.1 TITLE			Change	Addition
NAME	EBERHART, DOROTHY A		2.2 NA	ME				
STREET ADDRESS	23274 TORRE CIRCLE		23 51	23 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		2. 4 CI	TY-ST-Z	'IP			
TITLE	DELETE			3.1 TITLE			Change	☐ Addition
NAME			3.2 NA	3.2 NAME				
STREET ADDRESS	ess		3.3 ST6	3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CI	3.4. CITY-ST-ZiP				
TITLE	DELETE 4.1 T			LE		-	☐ Change	Addition
NAME		4.3		AME	1			
STREET ADDRESS		4.3		REET ADO	PRESS			
CITY-ST-ZIP			4.4 CIT	TY-ST-ZI	P			
TITLE		DELETE	5.1 T/T	'LE			Change	☐ Addition
NAME			5.2 NA	ME				ł
STREET ADDRESS			5.3 \$11	REET ADD	DRESS			ŀ
CITY-ST-ZIP			5.4 DIT	IY-ST-Zi	P			
TITLE		☐ DELETE	6.1 TF	LF			Change	Addition
NAME			6.2 NA	ME				1
STREET ADORESS	)		6.3 STI	REET ADD	XRESS			j
CITY-ST-ZIP			6.4 CIT	ΓY - ST - <b>Z</b> ł	P			ľ
	<del></del>							

Increby 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 or an attachment with an address.

SIGNATURE:

Sund O Suchar

3-26-98 954563 2649.