2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 456590

1. Entity Name
RICHARDS' DRAPERY INTERIORS, INC.

Principal Place of Business	Mailing Address
20277 OLD CUTLER RD	— 8114 SW 199TH TERRACE
MIAMI, FL 33189 US	MIAMI, FL 33189 US

DO NOT WRITE IN THIS SPACE

02252006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-1541254	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DIESMONE, RICHARD W.
8114 SW 199 TERRACE
MIAMI, FL 33189

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

U00000468231
03/24/06-80021-023 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DIESMONE,RICHARD W.
STREET ADDRESS	8114 S.W. 199 TERR.
CITY-ST-ZIP	MIAMI, FL
TITLE	SD
NAME	DIESMONE,DEANNA D
STREET ADDRESS	8114 S.W. 199 TERR.
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _RiCHARd DIESMONE_   _Richard Diesmone_ 3/10/06 (305)238-347

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR owner   Date   Daytime Phone #