

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

FILED

May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 512180 (1)
1. Corporation Name
CINNY'S INTERIORS, INC.

Principal Place of Business
7182 S.E. FEDERAL HWY.
STUART FL 34997

Mailing Address
7182 S.E. FEDERAL HWY.
STUART FL 34997

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/13/1976

2. Principal Place of Business 21 2201 SE INDIAN ST C-5 Suite, Apt. #, etc. 22 C-5 City & State 23 STUART FL Zip 24 34997	2a. Mailing Address 26 2201 SE INDIAN ST C-5 Suite, Apt. #, etc. 27 C-5 City & State 28 STUART FL Zip 29 34997	4. FEI Number 59-1700136 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEWITT LINDA C
10862 HAWK VIEW CIRCLE
STUART FL 34997

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

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)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DEWITT, LINDA C. 10862 SW HAWK VIEW CIR STUART FL	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	V DEWITT, WENDY 4941 ALDER DRIVE WEST PALM BEACH FL	2.1 TITLE	
NAME		2.2 NAME	10862 Hawkview Circle
STREET ADDRESS		2.3 STREET ADDRESS	STUART, FL, 34997
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	S WRIGHT, GAYE 3534 CORNERS WAY NORCROSS GA	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I 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.

SIGNATURE:

[Handwritten Signature]

4/28/98

SW 283-7445

CR2E034 (10/97)