2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 12, 2004 8:00 am Secretary of State **DOCUMENT # 515190** 1. Entity Name 04-12-2004 90677 017 ***150.00 ANITA MARGOLIS INTERIOR DESIGN, INC. Principal Place of Business Mailing Address 221 ARAGON AVE 221 ARAGON AVE #201 CORAL GABLES FL 33134 US CORAL GABLES FL 33134 2. Principal Place of Business 541 BRICKELL MOORE CR2E034 (11/03) 4. FEI Number Applied For 59-1712428 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARGOLIS, ANITA Street Address (P.O. Box Number is Not Acceptable) 1541 BRICKELL AVE #2005 **MIAMI FL 33129** Zip Code 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Defete TITLE Change ☐ Addition NAME MARGOLIS, ANITA NAME STREET ADDRESS 1541 BRICKELL AVE, #2005 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33129 CITY-ST-ZIP ☐ Delete ☐ Change Addition MARGOLIS, HERBERT G. NAME NAME 1541 BRICKELL AVE. #2005 STREET ADDRESS STREET ADDRESS MIAMI FL 33129 CITY-ST-7IP CITY-ST-7IP --- Delete TITLE -TITLE _ _ Change _ _ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-SY-ZIP 12. 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 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.

ED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Affachment 515190

ANITA **MARGOLIS** INTERIOR DESIGN INC.

AS OF 1/30/04, MY NEW ADDRESS, PHONE NUMBER, FAX NUMBER AND E MAIL WILL BE AS FOLLOWS:

ANITA MARGOLIS INTERIOR DESIGN, INC. 1541 BRICKELL AVENUE SUITE # 2005 MIAMI, FLORIDA 33129

PHONE (305)857 - 3500 FAX (305)858 - 3600 EMAIL anitamargolis@aol.com