2007 FOR PROFIT CORPORATION

FILED May 03, 2007 08:00 A Secretary of State **ANNUAL REPORT DOCUMENT #536016** MATTHEW-MICHAEL INTERIORS, INC. Mailing Address Principal Place of Business 1161 S.W. 74TH TERRACE 1161 S.W. 74TH TERRACE PLANTATION, FL 33317 PLANTATION, FL 33317 CR2E034 (11/05) 04302007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1754199 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LITWIN, HERB DO NOT WRITE 1161 S.W. 74TH TERRACE PLANTATION, FL 33317 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE LITWIN, HERB NAME 1161 S.W. 74TH TERRACE STREET ADDRESS CITY-ST-ZIP PLANTATION FL. TITLE LITWIN, BINI A NAME 1161 S.W. 74TH TERRACE STREET ADDRESS CITY-ST-ZIP PLANTATION FL. DILE STREET ADDRESS

DO NOT WRITE IN THIS SPACE

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental peport is frue 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 fruestee employment to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver or fruestee employment to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver or fruestee. this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information changed, or on an attachment with an Addre with all other like empowered.

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR