

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

FILED
Apr 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 612270 (9)

1. Corporation Name
WALLPAPER SHOWCASE OF ORLANDO, INC.



Principal Place of Business
4734A SOUTH KIRKMAN RD
ORLANDO FL 32811
US

Mailing Address
4734A SOUTH KIRKMAN RD
ORLANDO FL 32811-9643
US

3. Date Incorporated or Qualified
03/05/1979

3a. Date of Last Report
04/09/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-1906689	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23 Zip	28 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	25	29	30

9. Name and Address of Current Registered Agent
LANGELLA, PATRICIA
5818 CONROY RD
ORLANDO FL 32835

10. Name and Address of New Registered Agent
81 Name
DEBRA L. CRAVENER
82 Street Address (P.O. Box Number is Not Acceptable)
4734A SOUTH KIRKMAN RD.
83
84 City
ORLANDO FL 85 Zip Code
32811

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: *Debra L. Cravener* DATE: 4/4/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PST	<input checked="" type="checkbox"/> DELETE	1.1 TITLE PST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LANGELLA, PATRICIA		1.2 NAME DEBRA L. CRAVENER	
STREET ADDRESS 5818 CONROY RD		1.3 STREET ADDRESS 4034A SOUTH KIRKMAN RD.	
CITY-ST-ZIP ORLANDO FL		1.4 CITY-ST-ZIP ORLANDO, FL., 32811	
TITLE D	<input checked="" type="checkbox"/> DELETE	2.1 TITLE DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LANGELLA, PATRICIA		2.2 NAME PATRICIA LANGELLA	
STREET ADDRESS 5818 CONROY RD		2.3 STREET ADDRESS 4734A SOUTH KIRKMAN RD.	
CITY-ST-ZIP ORLANDO FL		2.4 CITY-ST-ZIP ORLANDO, FL., 32811	
TITLE V	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LANGELLA, MARCIA		3.2 NAME	
STREET ADDRESS 5818 CONROY RD		3.3 STREET ADDRESS	
CITY-ST-ZIP ORLANDO FL		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: *Debra L. Cravener* DATE: 4/4/97 (407)299-3423

CR2E034 (9/96)