

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90271 008 ***150.00

DOCUMENT # F00000001800

1. Entity Name
PAMELA MCCARTHY INTERIORS LTD, INC.



60027193



03302006 Chg-P CR2E034 (11/05)

Principal Place of Business 2921 MIDDLEBURY LANE BLOOMFIELD HILLS, MI 48301 US		Mailing Address 2921 MIDDLEBURY LANE BLOOMFIELD HILLS, MI 48301 US	
2. Principal Place of Business 303 Deer Creek Run		3. Mailing Address 303 Deer Creek Run	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Deerfield Beach FL		City & State Deerfield Beach FL	
Zip 33442	Country USA	Zip 33442	Country USA
4. FEI Number 38-3435269		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCCARTHY, PAMELA 303 DEER CREEK RUN DEERFIELD BEACH, FL 33442		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCCARTHY, PAMELA		NAME McCarthy, Pamela	
STREET ADDRESS 2921 MIDDLEBURY LANE		STREET ADDRESS 303 Deer Creek Run	
CITY-ST-ZIP BLOOMFIELD HILLS, MI 48301		CITY-ST-ZIP Deerfield Beach FL 33442	
TITLE VP	<input type="checkbox"/> Delete	TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCCARTHY, MICHAEL		NAME McCarthy, Michael	
STREET ADDRESS 2921 MIDDLEBURY LANE		STREET ADDRESS 303 Deer Creek Run	
CITY-ST-ZIP BLOOMFIELD HILLS, MI 48301		CITY-ST-ZIP Deerfield Beach FL 33442	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Pamela M. McCarthy x **4-10-06** **954-648-8983**