FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

F43088

(6)

1. Corporation Name

DESIGN HOUSE INTERIORS, INC.

	HOUSE INTERIORS, INC				,				
Principal Place of 3573 MERCHAN NAPLES FL 339	TILE AVENUE	Mailing Address 3573 MERCHANTILE AV NAPLES FL 33942	/ENUE						
						3. Date Incorporated or Qualified 09/02/1981	3a. Date of 03/2	Last Re 7/199	port 5
2. Principa' Plao	e of Business	2a. Mailing Address				4. FEI Number 59-2119931			pplied For lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	[] \$8.75 Additional Fee Required		
City & State	,	City & State				Election Campaign Financing Trust Fund Contribution			May Be I to Fees
3 Ζφ 4	Country 25	Zip 29	Cou	ntry		8. This corporation has liability for in Florida Statutes Yes	itangible tax u	nder s	199.032,
·1	9. Name and Address of Curr					10. Name and Address of New Re	gistered Ag	ent	
				81 N	ame				
Jones, Kermit e. 4751 Gulfshore Blvd., North				82 St	reet Addre	ess (P.O. Box Number is Not Acceptable)			
NAPLES F			!	83					
				84 C				'	Code
or registere familiar with SIGNATURE.	Sua Cyped or printed kinds of registers of ex	gent and title if applicable. If	OTE: Registered			tion submits this statement for the purid of directors. I hereby accept the appointment of the properties of the appointment of the properties of the proper	BATE -	7	
12.	OFFICERS /	AND DIRECTORS	13.	171 E		ADDITIONO/OFFINIALO TO CO.		Change	☐ Addition
TITLE	JONES, KERMIT E.	Dotter	12 N						
JAME Street address	4751 GULFSHORE BLVD., I NAPLES FL	N.	1.3 \$	TREET ADD					
CITY-ST-ZIP	STD	DELETE	2.1	RITY - ST - 21 Title	<u></u>			Change	☐ Addition
TITLE	JONES, JOYCE G.		221						
IAME STREET ADDRESS	4751 GULFSHORE BLVD.,	N.	238	STREET ADO	RESS				
DITY-ST-ZIP	NAPLES FL		240	CITY - ST - Z	Р			Ch	[] Addition
MILE		☐ DELETE	3.1				L	Change	L] Addition
NAME			321		20100				
STREET ADDRESS				STREFT AD					
CITY-SI-ZIP		DELETE		CITY-S1-Z Title	" 			Change	☐ Addition
TITLE NAME			4.2 1	NAME	ĺ				
STREET ADDRESS			4.3 3	STREFT AD	ORESS				
CITY - ST - ZIP			4.4 (CITY - ST - Z	IP.			Chann	T Addison
THILE		☐ DELETE		TITLE				Change	☐ Add₁tion
NAME				NAME					
STREET ADDRESS				STREET AD					
CITY-S1-ZIP		FT DELETE		CITY-ST-7	'IP			Change	Addition
TITLE		☐ DELETE		NAME			<u> </u>		
NAME				naive Street ac	DRESS				
STREET ADDRESS				DITY-SI	1				
CITY - ST - ZIP	All the the making a real	iod with this filing is valuntarily f	and a language of the second	-	ot ounlifu	or the exemption stated in Section 119 ate and that my signature shall have the	0.07(3)(k), Flori	da Stati	ites. I further

I. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k), Florida Statutes. Further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this amount of 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 manged on an arrival ment with an address.

SIGNATURE:

4/22/96

941 643 5388