

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90656 033 ***150.00

DOCUMENT # F54741

1. Entity Name

J & R INTERIOR DESIGNERS, INC.



Principal Place of Business

13935 S.W. 140 ST.
MIAMI, FL 33186

Mailing Address

1921 NW 129 TERR
MIAMI, FL 33167

94080668



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04202004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

65-0059794

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEWIS, JEFFREY
1921 N.W. 129 TERR.
MIAMI, FL 33167

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

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
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	LEWIS, JEFFREY	
STREET ADDRESS	1921 N.W. 129 TERR.	
CITY-ST-ZIP	MIAMI, FL 33167,	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	LEWIS, RETA E.	
STREET ADDRESS	1921 N.W. 129 TERR.	
CITY-ST-ZIP	MIAMI, FL 33167,	
TITLE	D	<input type="checkbox"/> Delete
NAME	LEWIS, LLOYD	
STREET ADDRESS	1921 N.W. 129 TERR.	
CITY-ST-ZIP	MIAMI, FL 33167,	
TITLE	D	<input type="checkbox"/> Delete
NAME	LEWIS, JUANITA	
STREET ADDRESS	1921 N.W. 129 TERR.	
CITY-ST-ZIP	MIAMI, FL 33167,	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFREY LEWIS 04/26/04 305-235 1348

Date

Daytime Phone #