2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 21, 2005 8:00 am Secretary of State DOCUMENT # F54741 1. Entity Name 03-21-2005 90106 031 ***150.00 J & R INTERIOR DESIGNERS, INC. Principal Place of Business Mailing Address 13935 S.W. 140 ST. 1921 NW 129 TERR 50028770 **MIAMI FL 33186 MIAMI FL 33167** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 65-0059794 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEWIS, JEFFREY Street Address (P.O. Box Number is Not Acceptable) 1921 N.W. 129 TERR. MIAMI FL 33167 City 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10, 11. THILE TITLE LEWIS RETA E. ☐ Detete NAME LEWIS, JEFFREY NAME 1921 N. W. 129 Terr Miami Fl. 33167 1921 N.W. 129 TERR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33167 CITY-ST-ZIP VTD □ Defete TITLE EWIS JEFFREY LEWIS, RETA E. NAME NAME 1921 N.W. 129 TELL STREET ADDRESS 1921 N.W. 129 TERR. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33167 CITY-ST-ZIP miami +1. 33167 - Delete -TITLE TITLE ☐ Change Addition LEWIS, LLOYD NAME STREET ADDRESS 1921 N.W. 129 TERR. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33167 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition LEWIS, JUANITA NAME NAME 1921 N.W. 129 TERR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33167 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ 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 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.

Keta Lemis RETA E. LEWIS 3-10-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

FILED