


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # F54741 1. Entity Name J & R INTERIOR DESIGNERS, INC.	
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Principal Place of Business 13935 S.W. 140 ST. MIAMI, FL 33186	Mailing Address 1921 NW 129 TERR MIAMI, FL 33167
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DO NOT WRITE IN THIS SPACE



04112007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0059794	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEWIS, JEFFREY 1921 N.W. 129 TERR. MIAMI, FL 33167,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD LEWIS, RETA E. 1921 N.W. 129 TERR. MIAMI, FL 33167,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, LLOYD 1921 N.W. 129 TERR. MIAMI, FL 33167,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, JUANITA 1921 N.W. 129 TERR. MIAMI, FL 33167,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U00000710754
04/25/07-80055-017 150.00

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: Reta Lewis Reta Lewis Vice President 4-11-07 305-235-1348
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #