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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F92372

1. Corporation	Name					
JOHN TH	OMAS INTERIOR DESIGN,	, INC.			1 100/100 110 1010 1000 1111 1001	
						1984 BYON BYON DIRN BION PURY BION 1981
Principal Place	of Business	Mailing Address				
214 34TH STREE		214 34TH STREET				•
WEST PALM BE	ACH FL 33407	WEST PALM BEACH FL 3	3407		DO NOT WRITI	E IN THIS SPACE
US		US		3. Date Incorporated or Qualifed		
					07/28/1982	一 一种 一种特别的基础基础
	<u> </u>	2a. Mailing Address			4. FEI Number	Applied For
2. Principal Place of Business		├ ~¬		59-2207452	Not Applicable	
21		Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	\$8.75 Additional	
Suite, Apt. #, etc.		27 Suite, Apr. #, etc.		5. Certifcate of Status Desired	Fee Required	
22		City & State			6. Election Campaign Financing	55.00 May Be
City & State	€	28			Trust Fund Contribution	Added to Fees
23	Country	Zip	Countr		8. This corporation owes the curre	nt year Intangible
Zip	_ _	29	30	•	Personal Property Tax.	☐ Yes ☐ No
24	9. Name and Address of Curre				10. Name and Address of New R	egistered Agent
	9. Name and Address of Curre	()	8	1 Name		1
THO	MAC IOHN H. IR		8	2 Street Adds	ress (P.O. Box Number is Not Accepta	ole)
	34TH STREET	4. (M	0	2 Street Addit	Agric And Interest Agree 1	and the second of the second o
	T PALM BEACH FL 33407		. 8	3	一种人工事的影響	
			<u>_</u>	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip Code
		,	8	4 City	•	Fi T
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0, 0 0000 0000	to the provisions of Sections 607.05	502 and 607 1508. Florida Stat	utes, the abo	ve-named corp	poration submits this statement for the	ourpose of changing its registered
11. Pursuant	to the provisions of Sections 607.05 registered agent, or both, in the State	502 and 607.1508, Florida Stat e of Florida. Such change was	utes, the abo	ve-named corp by the corporation	poration submits this statement for the on's board of directors. I hereby accep	ourpose of changing its registered t the appointment as registered
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the State im familiar with, and accept the oblig	502 and 607.1508, Florida State of Florida. Such change was pations of, Section 607.0505, F	utes, the abo authorized b lorida Statute	ve-named corp by the corporations.	poration submits this statement for the on's board of directors. I hereby accept	ourpose of changing its registered the appointment as registered
11. Pursuant office or r agent. I a					ed when reinstating)	ourpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable. (NO			ed when reinstating)	purpose of changing its registered the appointment as registered DATE CICERS AND DIRECTORS IN 12
SIGNATURE	Signature, typed or printed name of registered ag		TE: Registered Ag	gent signature require	ADDITIONS/CHANGES TO OFF	ourpose of changing its registered the appointment as registered
SIGNATURE 12. TITLE	Signature, typed or printed name of registered ag OFFICERS A	gent and title if applicable. (NO	TE: Registered Ag	gent signature require	ed when reinstating)	purpose of changing its registered the appointment as registered DATE CICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered ag OFFICERS A DP THOMAS, JOHN H, JR	gent and title if applicable. (NO	TE: Registered Ag 13. 1.1 BTLE 1.2 NAMI	gent signature require	ADDITIONS/CHANGES TO OFF	purpose of changing its registered the appointment as registered DATE CICERS AND DIRECTORS IN 12
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHATCHE OF PRINTED NAME OF SIGNING OF ICER OR DIRECTOR

JAN.4. 1999

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90014 036 ***150.00

561-842-9393

P2E034 (11/98)