2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

1. Entity Naп	MENT,# .F92372 HOMAS INTERIOR DESIGN,	INC.	-		,r (Secreta			7.1
,	e of Business	Mailing Address			}				
214 34TH STREET WEST PALM BEACH FL 33407 US		214 34TH STREET WEST PALM BEACH FL 33407 US							
2. Principal Place of Business		3. Mailing Address			{				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			15	t MOORE	CR2E034 (10	/05)	
City & State		City & State			4. FEI Numb	^{per} 59-2207452	2		lied For Applicat
Zφ	Country Zip		Country	untry 5. Certificate		e of Status Desired		75 Addit Required	
	6. Name and Address of Current	Registered Agent	, 1	vame	7. Name an	d Address of New R	egistered Agen		-
214	DMAS, JOHN H., JR 34TH STREET ST PALM BEACH FL 33407	, ·			P.O. Box Numb	per is Not Acceptable	()	<u> </u>	
			(City FL Zip Code					
After	Signature, typed or printed name of registered agentific NOW!!! FEE IS \$150.00 May 1, 2008 Fee Will Be \$550.00 k Payable to Florida Department of	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E-Registered Ag	ent signature roquirad	when remstaling)	Election Campa Trust Fund Con			O May € to Fees
10.	OFFICERS AND DIRECTORS		11.		ADDITIONS	CHANGES TO OFF			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PALM BCH, FL 00000		THE NAME STREET ADDRESS CUTY-ST-ZIP		U00000421767				
NAMI STREET ADDRESS CITY-ST-ZIP		☐ Delete	name Street al City-St-	(ayrango	
name Street Address City-SI-Zip	·	Deiots	Total Name Street a City St-	1					☐ Addit
title Name Street Address City-St-Itp		☐ Devete	HILE NAME STREET AI CITY-SI-	(Change 	□ Addin
TITLE NAME STREET ADDRESS CALY-ST-ZIP		☐ Delete	TITLE NAME STREET AL CHY-SI-	,				Change	∏ Açen
TITLE MAME STREET ADDRESS CITY-ST-ZIP		☐ Detete	Thtle Name Street at City-St-	}			. 🖂	Change	□ MARE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and apparate 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 of 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, min at after like empowered.

SIGNATURE: 20HN H. THUMAS, JR.

1/31/06 5561-842-9393

SIGNATURE:

1/31/06 5561-842-93930

FILED