FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H10595

Corporation Name

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90087 044 ***150.00

CUSTON	I PLUS INTERIORS, INC.									
Principal Plac	e of Business	Mailing Address							(
3615 N. W. 124TH AVENUE 3615 N. W. 124TH AVENUE										
CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065										
						DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed	SPACE			1
						06/26/1984				
Principal Place of Business 2a. Mailing Address						4. FEI Number	$ \Gamma$	Applic	ed For	
⊢	26	g Address			59-2418586	Not Applicable				
26 Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.7	75 Add		=
22	27	•			5. Certificate of Status Desired	Fe	e Requ	iired		
City & Stat	te · ,	City & State	City & State			6. Election Campaign Financing S5.00 May Be				
23		28				Trust Fund Contribution Added to Fees				
Zip	Zip Country Zip			try		8. This corporation owes the current year Inta		V	! 1	l
24	25		30			Personal Property Tax.	☐ Yes		No	}
	9. Name and Address of Curren	t Registered Agent	 -⊦.	B1 N		10. Name and Address of New Registered	gent			-
1116	GHES, JOHN R.		'	יו	Name					
1595 N.W. 85TH DRIVE			82 Street Addr			ess (P.O. Box Number is Not Acceptable)				
1	RAL SPRINGS FL 33065			B3						
00.	# 12 O. 1.11100 1 E 00000		- 1	3						}
			- [1	B4 (City	FL	85	Zip Coo	de	
office or i agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obligate Signature, typed or printed name of registered ager	tions of, Section 607.0505, Flori	da Statut	ies.		n's board of directors. I hereby accept the appoin	uneni a			آ
12. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS AN	DIRE	CTORS	S IN 12	ç
TITLE	P			1.1 TITLE			☐ Cha		☐ Addition	1
NAME	HUGHES, JOHN R.		1.2 NAME							2
STREET ADDRESS	1595 NW 85TH DR		1.3 STREE		DRES\$					Ĭ
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY-		Р					Ì
TITLE	V	☐ DELETE	2.1 TITL	E			☐ Cha	nge	☐ Addition	١
NAME	HUGHES, JOHN R., III		2.2 NAME							
-STREET ADDRESS	=1595-N-W-85TH-DRIVE =			EET AD	1					-
CITY-ST-ZIP	CORAL SPRINGS FL			2.4 CITY-ST-ZIP			[] Cha		Addition	ĺ
TITLE	T THOUSE POUCLAS	□ DELETE	****		Ì		L) Cilia	(igic		}
NAME	HUGHES, DOUGLAS 1595 N. W. 85TH DRIVE		3.2 NAM		DDC00					
STREET ADDRESS	CORAL SPRINGS FL	•	·		DRESS					
C/TY-ST-ZIP	VP	☐ DELETE	3.4. CITY- 4.1 TITLE		IP		☐ Cha	nge	Addition	1
NAME	HUGHES, ROBERT	<u> </u>	4.2 NA		ļ		<u> </u>			ļ
STREET ADDRESS	APPENDING SETTING		4.3 STREE		DRESS					
CITY-ST-ZIP	CORAL SPRINGS FL		4.4 CITY-							
917 1 - Q 1 - KII	VS	☐ DELETE	5.1 TITL						Addition	1
TITLE	HUGHES, KATHLEEN J.		5.2 NAME				☐ Cha	(IAc		1
NAME	1		5.2 NAM				Cha	iige		l
1	(1000 N. W. OOM DIGHT		5.2 NAM 5.3 STR	4E	DRESS (Cha	iige		
NAME	CORAL SPRINGS FL			KE EETAD	- 1		☐ Cha			
NAME STREET ADDRESS		☐ DELETE	5.3 STR	ME EETAD Y-ST-ZI	- 1		☐ Cha		Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.3 STR 5.4 CITY 6.1 TITL 6.2 NAM	ME EETAD Y-ST-ZI E ME	р				Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	CORAL SPRINGS FL	☐ DELETE	5.3 STR 5.4 CITY 6.1 TITL 6.2 NAM 6.3 STR	ME EETAD Y-ST-ZI E ME	DRESS				☐ Addition	

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