2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10595

Entity Name: CUSTOM PLUS INTERIORS, INC.

FILED Aug 02, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1595 NW 85TH DR

CORAL SPRINGS, FL 33071

Current Mailing Address: New Mailing Address:

1595 NW 85TH DR CORAL SPRINGS, FL 33071

FEI Number: 59-2418586 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HUGHES, JOHN R.

1595 N.W. 85TH DRIVE

CORAL SPRINGS, FL 33065

HUGHES, KATHLEEN J

1595 N.W. 85TH DRIVE

CORAL SPRINGS, FL 33065

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.

SIGNATURE: KATHLEEN J. HUGHES 08/02/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PST (X) Change () Addition

 Name:
 HUGHES, JOHN R.,
 Name:
 HUGHES, KATHLEEN J

 Address:
 1595 NW 85TH DR
 Address:
 1595 NW 85TH DR

 City-St-Zip:
 CORAL SPRINGS, FL
 City-St-Zip:
 CORAL SPRINGS, FL 33071

 Name:
 HUGHES, JOHN R., III,
 Name:

 Address:
 1595 N W 85TH DRIVE
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 HUGHES, DOUGLAS,
 Name:

 Address:
 1595 N. W. 85TH DRIVE
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 HUGHES, ROBERT,
 Name:

 Address:
 1595 N. W. 85TH DRIVE
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL
 City-St-Zip:

Title: VS (X) Delete Title: () Change () Addition

 Name:
 HUGHES, KATHLEEN J.
 Name:

 Address:
 1595 N. W. 85TH DRIVE
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN J HUGHES P 08/02/2004