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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H73659

(5)

| Corporation Name | 5555 | |
|------------------|-------------|--|
| THE INTERIORS | GROUP, INC. | |
| | | |

FILED Feb 18 1997 8:00am Secretary of State

| Principal Place of Business | | | | | | | | |
|--|-----------------------------|----------------|-------------------------|---|--|-----------------------|--|--|
| Principal Place of Business Mailing Address 185 SPANISH RIVER BLVD. #230 185 SPANISH RIVER BLVD BOCA RATON FL 33431 BOCA RATON FL 33431-42 | | | | | | | | |
| | | | | 3. Date Incorporated or Qualified 08/29/1985 | 3a. Date of Last F 03/11/1996 | Report | | |
| 2. Principal Place of Business | 2a. Mailing Address | | | 4, FEI Number | } | pplied For | | |
| 21 | 26 | | | 59-2572276 | | ot Applicable | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | 1 7 7 7 7 7 | Additional equired | | |
| City & State | City & State | | | 6. Election Campaign Financing | | May Be | | |
| 23 | 28 | | | Trust Fund Contribution | | to Fees | | |
| Zip Country 25 | Zip 29 | Coun | try | This corporation has liability for Florida Statutes | r intangible tax under : ☐ Yes ☐ No | s. 199.032, | | |
| g. Name and Address of Current R | | | | 10. Name and Address of New R | | _ | | |
| GOLDBERG, LAWRENCE H. | ····· | - 1 | 1 Name | | | | | |
| 1630 NORTH FEDERAL HWY | | la la | 2 Street Add | ress (P.O. Box Number is Not Accepta | able) | | | |
| FT. LAUDERDALE FL 33305 | | | | | | | | |
| | | 1 | 13 | | | | | |
| | | 1 | 64 City | | FL 85 Zip | Code | | |
| 11. Pursuant to the provisions of Sections 607.0502 a | ind 607 1508. Florida Statu | tes, the ab | ove-named core | poration submits this statement for the | nurnose of changing | its registered | | |
| office or registered agent, or both, in the State of | Florida Such change was | authorized | by the corpora | tion's board of directors. I hereby acc | ept the appointment as | registered | | |
| office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE Signature typed or printed name of registered agent a | | TE. Registered | Agent signature requi | red when reinstating) | DATE | | | |
| 12. OFFICERS AND D | | 13. | | ADDITIONS/CHANGES TO OFF | | RS IN 12 | | |
| NAME REICH, MICHELLE | ☐ DELETE | 1.1 TITL | | | Change | ☐ Yaqiaqii | | |
| SIREET ADDRESS 2240 DATE PALM ROAD | | 1.2 NAM | EET ADDRESS | | | | | |
| CITY-ST-ZIP BOCA RATON FL | | | -ST-ZIP | | | | | |
| TITLE | DELETE | 2.1 TITL | | | Change | Addition | | |
| NAME | | 2.2 NAM | te l | | | | | |
| STREET ADDRESS | | 2.3 STR | eet address | | | 1 | | |
| CITY-ST-ZIP | | | Y-ST-ZIP | · . | | | | |
| TIFLE | DELETE | 3 1 TITU | | | L Change | ☐ Addition | | |
| NAME | | 3.2 NAM | | | | | | |
| STREEF ADDRESS | | | EET ADDRESS Y-ST-ZIP | | | | | |
| CITY - ST - ZIP | DELETE | 4 1 TITE | | | ☐ Change | Addition | | |
| NAME | | 4.2 NA | 1 | | | | | |
| STREET ADDRESS | | 4.3 STR | EET ADDRESS | | | | | |
| CITY - ST - ZIP | | 4 4 CIT | (-ST-ZIP | -,· | | | | |
| TITLE | DELETE | 5.1 TITL | E | | Change | Addition | | |
| NAME | | 5.2 NAM | | | | | | |
| STREET ADDRESS | | | EET ADDRESS | | | | | |
| CITY-ST-ZIP | ☐ DELETE | 5.4 CIT | r-ST-ZIP | | Change | Addition | | |
| TITLE NAME | | 6.2 NAM | · | | □ ovanigo | | | |
| STREET ADDRESS | | | EET ADDRESS | | | | | |
| CITY-ST-ZIP | | | -ST-ZIP | | | | | |

14. I do 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 directly of the corporation or the receiver or trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or man attachment with an address.