

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90278 014 \*\*\*150.00

**DOCUMENT # H94221**

1. Entity Name

L & S INTERIORS, INC.



Principal Place of Business

% LINDA SPILLANE  
106 ORIOLE COURT  
ROYAL PALM BEACH FL 33411

Mailing Address

% LINDA SPILLANE  
106 ORIOLE COURT  
ROYAL PALM BEACH FL 33411

2. Principal Place of Business

10401 OAK Meadow Lane

Suite, Apt. #, etc.

3. Mailing Address

10401 OAK Meadow Lane

Suite, Apt. #, etc.

City & State

Lake Worth, FL

City & State

Lake Worth, FL

Zip

33467

Country

Palm Beach

Zip

33467

Country

Palm Beach



MOORE

CR2E034 (11/03)

4. FEI Number

59-2638752

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPILLANE, LINDA  
106 ORIOLE COURT  
ROYAL PALM BEACH FL 33411

7. Name and Address of New Registered Agent

Name: Spillane, Linda

Street Address (P.O. Box Number is Not Acceptable)

10401 OAK Meadow Lane

City

Lake Worth

FL

Zip Code

33467

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Linda Spillane*

LINDA SPILLANE, PRES.

3/27/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete  
NAME SPILLANE, LINDA  
STREET ADDRESS 106 ORIOLE COURT  
CITY-ST-ZIP ROYAL PALM BEACH FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition  
NAME Spillane, Linda  
STREET ADDRESS 10401 OAK Meadow Lane  
CITY-ST-ZIP Lake Worth, FL 33467

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda Spillane* LINDA SPILLANE, PRES. 3/27/04 561-357-1207

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #