

Sent By: RIO SMIDHUM & MANLEY;

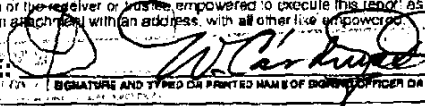
813 877 1050;

Apr

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90432 026 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # J01513																									
1. Entity Name W.E. INTERIORS, INC.																									
Principal Place of Business 4310 W SOUTH AVE TAMPA, FL 33614 US			Mailing Address 4310 W SOUTH AVE TAMPA, FL 33614 US																						
2. Principal Place of Business			3. Mailing Address																						
Suite, Apt. #, etc.			Suite, Apt. #, etc.																						
City & State			City & State																						
Zip		Country	Zip		Country																				
4. FCI Number 59-2660076			Applied For Not Applicable																						
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required																						
6. Name and Address of Current Registered Agent CARDENAS, WILFREDO 3218 W. LOUISIANA AVE. TAMPA, FL 33614			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																						
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 _____ DATE _____ Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reappointing)																									
FILE NOW!!! FEE IS \$160.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																							
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																						
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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 of this report.																									
SIGNATURE:  WILFREDO CARDENAS 04/29/04 (813) 348-0970																									