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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

J10625

(8)

DAVIS INTERIORS, INC.

Principal Place of Business Mailing Address							0 11091 1 161 81011	8 (8 (1) 1 1 1 1 1 1 1 1 1	FO O O	
5449 S. SEMORAN BLVD #214 ORLANDO FL 32822			5449 S. SEMORAN BLVD #214 ORLANDO FL 32822							
							 Date incorporated or Qualifie 04/23/1986 	ed 3a. Dat	e of Last f 06/19/ 1	,
2. Principal Pla	ce of Business	2a. Mailin	g Address	- Mark Sand 18 at 11 address at 100 december 1			4. FEI Number			Applied For
21		26	A-1 # -1-				59-2823409		<u> </u>	Not Applicable
Suite, Apt. #	, etc.	27	Apt. #, etc.				Certificate of Status Desired			5 Additional Required
City & State			State			 	6. Election Campaign Financing		\$5.0	00 May Be
23		28					Trust Fund Contribution	<u> </u>		ed to Fees
Zip ·	Country	Z ₁ p	<u></u> ⊢				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No			
24	9. Name and Address of Current Registere			[30]			10. Name and Address of New Registered Agent			
	9, Name and Address of Carl	cit registeres :	ngem		81	Name	10, Hamb and Hadreds of He		Agoin.	
DAVIS	JEFFERSON C.				82	Etrant Ada	dress (P.O. Box Number is Not Accep	table)		
	RENDA DRIVE		62 Street Add			Street Add	JIESS (IF.O. BOX NOTIDE) IS NOT ACCE	ланеј		
	DO FL 32806				в3					
					84	City			85 2	ip Code
							~	FL	<u>- 1 1 1 </u>	
or registere familiar with	or the provisions of Sections 607.05 and agent, or both, in the State of Fig n, and accept the obligations of, Se	orida. Such chang	ge was authori	zed by the c	corpo	oralion's bo	pration submits this statement for the ard of directors. I hereby accept the a	appointment a	s registere	d agent. I am
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable		IO1E Registered	Agen	t signature recuii	red when reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS		13.			ADDITIONS/CHANGES TO			
TITLE	P		DELETE	1, 1 7					☐ Change	Addition
NAME	DAVIS, JEFFERSON C			1.2 NA						
STREET ADDRESS	4864 Brenda dr. Orlando fl					ADDRESS				
CITY-S1-ZIP TITLE	V		□ DELETE	1.4 CI 2. 1 TI		1-214			☐ Change	Addition
NAME	DAVIS, PANSY O.			22 N/						
STREET ADDRESS	4864 BRENDA DR.			2.3 \$1	REET	ADDRESS				
CITY-ST-ZIP	ORLANDO FL			2.4 CI	TY-S	T-ZIP				
	 \$1		DELETE	3 1 T	TLE				Change	Addition
NAME	MITCHELL, DEBORAH K			3 2 N/						
STREET ADDRESS	13315 KIRBY SMITH RD.					ADDRESS				
CITY-ST-ZIP TITLE	ORLANDO FL		DELETE	3.4 Cl 4. 1 T		1 - ZIP			Change	Addition
NAME			□ precet	42 N					L Orlange	- I Addition
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				4.4 CF						
TITLE			DELETE	5. 1 T					☐ Change	: 🔲 Addition
NAME				5.2 N	AME					
STREET ADDRESS				5.3 ST	TREFT	ADDRESS				
CITY-ST-ZIP	The state of the s	*** * *** * *** **** *** * *** * *** ** *	no nei ere	5.4 CI		T-ZIP			[] Chan-	Medition
TITLE			DELETE	6.1T					Change	: Addition
NAME CIDEET ADDRESS				6.2 N/		ADDRESS				
STREET ADDRESS CITY-ST-ZIP				6.4 CI						
14. I do hereby				rnished and	doe	s not qualify	for the exemption stated in Section			
oath; that I	am an officer or director of the co	rporation or the re	oceiver or trust	lee empowe			rate and that my signature shall have his report as required by Chapter 601			
appears in	Block 12 or Fronk 13 if changed, o	or on an attachme	ent with an add	dress.			.11	film	۱۵.	- A
SIGNAT	UBE: A JOHNA A	(That	Thell				4129190	.(40%	100	5-764
JIMITAL	SIGNATURE AND TYPE	OR PRINTED NAME	OF SIGNING OFFI	CER OR DIREC	TOR		Zite /		Dayfnie Phor	
	11000	In No.	ドエハーナ	7 n o l			•			