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95 JUN 21 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J25092 (4)
1. Corporation Name
INTERIOR CONTRACTING SPECIALISTS, INCORPORATED

Principal Place of Business Mailing Address
4627 NW 87 ST.
MIAMI FL 33178
US
% HUGHES & SILVERS
1141 KANE CONCOURSE
BAY HARBOR ISLANDS FL 33154
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 07/21/1986 3a. Date of Last Report 01/25/1994
4. FEI Number 59-2775965 Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 190.022, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 1017 JEFFERSON AVE. 25 % HUGHES SILVERS + GLASSMAN
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 #107 27 1140 KANE CONCOURSE - 5th FLOOR
City & State City & State
23 MIAMI BEACH, FL 28 BAY HARBOR ISLANDS, FL
Zip Zip
24 33139 25 Country 29 33154 30 Country

9. Name and Address of Current Registered Agent
SILVERS, ROBERT H
C/O HUGHES & SILVERS
1141 KANE CONCOURSE
BAY HARBOR ISLANDS FL 33154

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 % HUGHES SILVERS + GLASSMAN
1140 KANE CONCOURSE - 5th FLOOR
84 BAY HARBOR ISLANDS FL 85 Zip Code 33154

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and filed of qualification) (If SE, Registered Agent signature required when re-designating) DATE

12. OFFICERS AND DIRECTORS
TITLE PST
NAME CHANIN, CLIFFORD B.
STREET ADDRESS C/O HUGHES & SILVERS 1141 KANE
CITY ST ZIP BAY HARBOR ISLANDS FL
TITLE V
NAME CHANIN, CLIFFORD, B
STREET ADDRESS C/O HUGHES & SILVERS 1141 KANE
CITY ST ZIP BAY HARBOR ISLANDS FL
TITLE
NAME
STREET ADDRESS
CITY ST ZIP
TITLE
NAME
STREET ADDRESS
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NAME
STREET ADDRESS
CITY ST ZIP
TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS % HUGHES SILVERS + GLASSMAN
1.4 CITY ST ZIP 1140 KANE CONCOURSE 5th FLOOR
BAY HARBOR ISLANDS, FL 33154
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS % HUGHES SILVERS + GLASSMAN
2.4 CITY ST ZIP 1140 KANE CONCOURSE 5th FLOOR
BAY HARBOR ISLANDS, FL 33154
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/16/95

531-8276