## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

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## DOCUMENT # J34084 1. Entity Name INTERIOR ELEGANCE, INC.



US

**FILED** Apr 07, 2008 08:00 A Secretary of State

Principal Place of Business INTERIOR ELEGANCE INC.

Mailing Address

3320 LAND O LAKES BLVD LAND O LAKES, FL 34639 US INTERIOR ELEGANCE INC. 3320 LAND O LAKES BLVD LAND O LAKES, FL 34639

03272008



CR2E034 (11/05)

Applied For 4. FEI Number 59-2726258 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

CARRUTHERS, PAULA F. 3320 LAND O LAKES BLVD LAND O LAKES, FL 34639

indicated on this report or supplemental report is of the corporation or the receiver or trustee empo changed, or on an attactment with an address, w

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No Chg-P

| 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  |  |      |  |  |                                |                                    |        |
| Organizació, y portio di partido de esperta de usua e apparatura. (1901 E. ricoglassia de regular a regular a regular de |  |      |  |  |                                |                                    |        |
| FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.   |  |      |  |  | \$5.00 May Be<br>Added to Fees | U00000881660<br>04/16/08-80009-010 | 150.00 |
| 10.   | OFFICERS AND DIREC   | TORS |  |  |                                |                                    |        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | P<br>CARRUTHERS, PAULA F.<br>3320 LOAND O LAKES BLVD<br>LAND O LAKES, FL 34639 |      |  |  |                                |                                    |        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |      |  |  |                                |                                    |        |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  |      |  |  | DO                             | NOT WRITE                          |        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |      |  |  | IN '                           | THIS SPACE                         | ·<br>İ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |      |  |  |                                |                                    |        |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |      |  |  |                                |                                    |        |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receiper or trustee employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if  |  |      |  |  |                                |                                    |        |