

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 10, 1999 8:00 am
Secretary of State

08-10-1999 90014 006 ***150.00

DOCUMENT # **J74460**

1. Corporation Name

AYNSLEY NICOLE INTERIORS, INC.

Principal Place of Business

140 W GLADES RD. STE 1
BOCA RATON FL 33432
US

Mailing Address

140 W GLADES RD. STE 1
BOCA RATON FL 33432
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/22/1987

4. FEI Number

58-1739417

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 owes the current year
Intangible Personal Property.



Yes

☐ No

2. Principal Place of Business

21 **2910 N. Federal Highway #B**

Suite, Apt. #, etc.

22 **BOCA RATON, FL**

23 **33431**

24 **33431**

2a. Mailing Address

26 **2910 N. FEDERAL HIGHWAY #B**

Suite, Apt. #, etc.

27 **BOCA RATON, FL**

28 **33431**

29 **33431**

9. Name and Address of Current Registered Agent

FLEISHNER, KENNETH M.

140 W GLADES RD, STE 1 2910 N. FEDERAL HIGHWAY #B

BOCA RATON FL 33432-33432

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **FLEISHNER, KENNETH M.**

STREET ADDRESS **140 W GLADES RD, STE 1**

CITY-ST-ZIP **BOCA RATON FL**

TITLE **D** ☐ DELETE

NAME **FLEISHNER, CYNTHIA S**

STREET ADDRESS **140 W GLADES RD, STE 1**

CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2910 N. Federal Highway Suite B

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

2910 N. Federal Highway Suite B

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 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 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: **KENNETH M FLEISHNER PRES**

4/24/99

Date

Daytime Phone #

CR2E034 (5/99)

0078713

374420
603440-9004-6



August 4, 1999

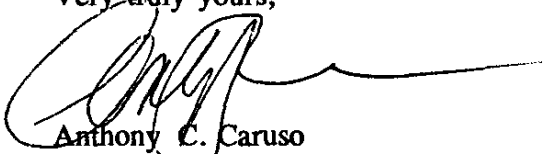
Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear Sirs:

Please find enclosed a newly executed corporate annual report and accompanying check in the amount of \$150. Payment was made and this report was initially filed on a timely basis. Unfortunately, our client's address had changed and we believe that initial reports may have been lost in the mail. Our client ultimately issued a replacement check however this did not have an accompanying copy of the original form and was returned to our client. We are now resubmitting the payment and a newly completed corporate annual report to complete this filing.

We respectfully ask that no penalty charges be assessed since the corporation did timely remit payment. We thank you in advance for your kind consideration.

Very truly yours,


Anthony C. Caruso
Certified Public Accountant

ACC:bh
coverlet\aynaley.fds