FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K10629

(9)

A & J CAIN INTERIORS, INC.

Principal Place	of Business	Mailing Address			i diqui bigil qibil qibif dixil qibil ?bbi	
14104 MANDARIN OAKS LANE JACKSONVILLE FL 32223 US		POST OFFICE BOX 2295 PONTE VEDRA BEACH FL 32004-2295 US				
		and the second s	TB-T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		3. Date incorporated or Qualified 01/05/1988	3a. Date of Last Report 02/13/1996
· ·	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt.	H. rdz	Suite, Apt. #, etc			59-2859984	Not Applicable \$8.75 Additional
22	, L.C.	 	27		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	!	City & State	······································		6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zιρ	Country	Zip	Cou	intry	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30	_		Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New R	egistered Agent
	, RICHARO L.			81 Name		
14104 MANDARIN OAKS LANE				82 Street A	Address (P.O. Box Number is Not Accepta	ble)
JACKSONVILLE FL 32223				83		
				84 City		FL 85 Zip Code
11, Pursuant to office or reagent. Lar	o the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Florida S of Florida Such change v diens of, Section 607.050	tatutes, the a vas authorize 5, Florida Sta	bove-named and by the corputates.	corporation submits this statement for the oration's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
SIGNATURE						
	Stignature: hypother printed name of registered ager			d Agent signature	required when reinstating)	DATE
12.	OFFICERS AND	DELETE	13.	ITE E	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME	D Cain, Janet B.		12 N	1		
STREET ADDRESS	14104 MANDARIN OAKS LANE			TREET ADDRESS	ı	
CHTY - S1 - ZiP	JACKSONVILLE FL			ITY-ST-ZIP		
101.E	P	DELETE				Change Addition
NAME	CAIN, RICHARD		2.2 N	IAME		4,
STREET ADDRESS	14104 MANDARIN OAKS LANE		2.3 \$	TREET ADDRESS	•	
CITY - S1 - ZIP	JACKSONVILLE FL			CITY-ST-ZIP		
TITLE	VP	☐ DELETE	3.1 T	ITLE		Change Addition
NAME	LANCASTER, ANITA L		3.2 N			
STREET ADDRESS	1040 SAN JOSE BLVD.		3.3 \$	TREET ADDRESS		
C(TY+S1+7IP	JACKSONVILLE FL	the exc		CITY-ST-ZIP		Objection Addition
THLE	VP	L) DELETE	1			Change Addition
NAME	CAIN, MELISSA		4	NAME		
STREET ADDRESS	10210 SAN JOSE BLVD.			TREET ADDRESS		
CITY-ST-7IP TITLE	JACKSONVILLE FL	DELETI		ITLE		Change Addition
NAME		Last Diction		IAME		Fred Autorities Fred Autorities
STREET ADDRESS				TREET ADDRESS		
EITY-ST-ZIP				CITY-ST-7IP		·

SIGNATURE:

14. I do hereby certify that the information information indicated on this annual relation an officer or director of the conappears in Block 12 or Block 13 characteristics.

TITLE

NAME

STREET ACCRESS

CHY-ST-ZIP

plied with this filing does not o or supplemental annual report

☐ DELETE

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

of or alif for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the series frue and accurate and that my signature shall have the same legal effect as if made under oath; that empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name an address.

FILED

Feb 18 1997 8:00am

Secretary of State

Change

☐ Addition