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

**PROFIT** CORPORATION ANNUAL REPORT

1998

City & State



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K21897 (9)

City & State

**G & F INTERNATIONAL INTERIORS, INC.** 

**FILED** Mar 18 1998 8:00am Secretary of State

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This corporation owes or has paid the current year Intangible

Principal Place of Business	Mailing Address	i emandrie den fildet ildes deien instridet filder and	er medier deliter denes annes eliche
5110 SO RIDGEWOOD AVENUE D	5110 SO RIDGEWOOD AVENUE D	•	
ALLANDALE FL 32127	ALLANDALE FL 32127	DO NOT WRITE IN THIS SPACE	
US	US	3. Date incorporated or Qualified	
		04/18/1988	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
1136 Squirrel N	est 26 1/36 Squirrel Nes	59-2877744	Not Applicat
Suite Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional

Florida Country 32// 10/4510- 28 o. Name and Address of Current Registered Agent HUGHES, BARRY E. 2001 SO, RIDGEWOOD AVE. SO, DAYTONA FL 32019

_	Total
	10. Name and Address of New Registered Agent
11	Name
3	Street Address (P.O. Box Number is Not Acceptable)
3	

6. Election Campaign Financing

Trust Fund Contribution

84 City

	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.
SIG	NATURE

Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change ☐ Addition 11 TITLE TITLE RYAN, GLORIA M. 12 NAME NAME 1136 SQUIRREL NEST 1.3 STREET ADDRESS STREET ADDRESS PORT ORANGE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition 2.1 TITLE TITLE NAME RYAN, DANIEL 2.2 NAME 1136 SQUIRREL NEST STREET ADORESS 2.3 STREET ADDRESS PORT ORANGE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3 4. CITY-ST-ZIP DELETE Addition 41 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change ☐ Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP 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 attractment with an address.

904-761-6790

\$5.00 May Be

Added to Fees

Zip Code

85