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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K26932 (9)

1. Corporation Name:
INTERIORS BY RUDY, INC.

Principal Place of Business 1334 NW 29 ST MIAMI FL 33142	Mailing Address 1334 NW 29 ST MIAMI FL 33142
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2. Principal Place of Residence 21	2a. Mailing Address 26
State Apt # etc 22	State Apt # etc 27
City & State 23	City & State 28
County 24	County 29
City 30	City 31

3. Date Incorporated or Qualified 06/23/1988	3a. Date of Last Report 02/28/1994
4. FEI Number 65-0056264	Applied For Not Applicable
5. Certificate of Status (Required) ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. This corporation has liability for damages for work in Florida Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

**MAZZOLA, FAUSTO R.
9900 SW 136 CT
MIAMI FL 33186**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 607.01(2)(c) 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 obligation of Sections 607.01(2)(c) Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS

12.1 NAME DP MAZZOLA, FAUSTO R. 9900 SW 136 CT MIAMI FL
12.2 NAME DS MAZZOLA, ELSA 9900 SW 136 CT MIAMI FL
12.3 NAME
12.4 NAME
12.5 NAME
12.6 NAME
12.7 NAME
12.8 NAME
12.9 NAME
12.10 NAME

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, IF ANY

13.1 NAME	☐ Change ☐ Addition
13.2 NAME	
13.3 NAME	
13.4 NAME	
13.5 NAME	
13.6 NAME	
13.7 NAME	
13.8 NAME	
13.9 NAME	
13.10 NAME	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.01(2)(c) Florida Statutes. I further certify that the information included in 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 on Block 12 or Block 13 of a document filed in this office in compliance with the provisions of Chapter 607, Florida Statutes.

SIGNATURE: *Fausto R. Mazzola*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-95

227-2120