

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

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Apr 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K99499 (1)
 1. Corporation Name
HYDE PARK INTERIORS, INC.



Principal Place of Business 11724 N. DALE MABRY TAMPA FL 33618-5604 US	Mailing Address 11724 N. DALE MABRY TAMPA FL 33618-3504 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/30/1989	3a. Date of Last Report 04/12/1996
21		26		4. FEI Number 59-2963741	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	Zip	25	Country	29	Zip
24		25		29	

9. Name and Address of Current Registered Agent RODENAS, VIVIAN 11724 N. DALE MABRY HIGHWAY TAMPA FL 33618				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 _____ DATE _____
 Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	STREET ADDRESS	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS
PD	RODENAS, VIVIAN	4112 BRENTWOOD PARK CIRCLE			
		TAMPA FL 33624			
			2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS
			2.4 CITY-ST-ZIP		
			3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS
			3.4 CITY-ST-ZIP		
			4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS
			4.4 CITY-ST-ZIP		
			5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS
			5.4 CITY-ST-ZIP		
			6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS
			6.4 CITY-ST-ZIP		

14. I do 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:

Vivian Rodenas
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-97

813-264-4425

Date

Daytime Phone #

CR2E034 (9/96)