2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000014518

1. Entity Name C L INTERIOR DESIGN, LLC

Principal Place of Business

2200 CORPORATE BLVD., N.W., STE. 401

BOCA RATON, FL 33431

Mailing Address

2200 CORPORATE BLVD., N.W., STE. 401 BOCA RATON, FL 33431

FILED Apr 28, 2004 8:00 am Secretary of State

04-28-2004 90077 048 ****50.00



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

| | | |
|---------------|------|----------------|
| 4. FEI Number | | Applied For |
| 22-3858247 | | Not Applicable |

5. Certificate of Status Desired

04192004

\$5.00

561.997.9223

4.20.04

6. Name and Address of Current Registered Agent

HCRM CORP. 2200 CORPORATE BLVD., N.W., STE. 401 BOCA RATON, FL 33431

DO NOT WRITE IN THIS SPACE

| | named entity submits this statement for the purpose of char ions of registered agent. | nging its registered office or registered agent, or both, in the State of | Florida. I am familiar with, and accept |
|--|---|---|---|
| SIGNATURE | Signature, typed or printed name of registered agent and title if applicable. | (NOTE: Registered Agent signature required when reinstating) | DATE |
| | ling Fee is \$50.00 ue by May 1, 2004 | | |
| 9. | MANAGING MEMBERS/MANAGERS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR COLONIAL MANAGER, INC 2200 CORPORATE BLVD NW STE 401 BOCA RATON, FL 33431 | | |
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| indicated | certify that the information supplied with this filing does not q on this report is true and accurate and that my signature shi bility company or the receiver or trustee empowered to exec | ualify for the exemption stated in Section 119.07(3)(i), Florida Statute all have the same legal effect as if made under oath; that I am a ma ute this report as required by Chapter 608, Florida Statutes. | es. I further certify that the information naging member or manager of the |