

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L18452**

(7)

1. Corporation Name

CHELSEA INTERIORS, INC.



Principal Place of Business

**2811 BENT CYPRESS RD.
W. PALM BCH. FL 33414
US**

Mailing Address

**2811 BENT CYPRESS RD.
W. PALM BCH. FL 33414
US**

3. Date Incorporated or Qualified

09/26/1989

3a. Date of Last Report

02/03/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0149199

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HAYES, SHEREE L.
2811 BENT CYPRESS RD.
W. PALM BEACH FL 33414**

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

Signature of person submitting this statement for filing (must be the registered agent)

Signature of Registered Agent (must be the person submitting)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ DELETE

☐ Change ☐ Addition

1. TITLE

P

NAME

HAYES, SHEREE L.

STREET ADDRESS

2811 BENT CYPRESS RD.

CITY - ST - ZIP

W. PALM BEACH FL 33414

1. TITLE

☐ DELETE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

1. TITLE

☐ DELETE

☐ Change ☐ Addition

NAME

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☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Sherree Laws Hayes, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sherree Laws Hayes, President

2.10.96

Date

407.798.5842

Daytime Phone #

CR2E034 (12/95)