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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

_	ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS								
	MENT # L House and I		(4) Interiors, inc.			A TERNIBUL BEST HITE HOLES GILL BUSIN 1881	legei ded el a ss	ku baku bada	Biğil iğal
Principal Place of Husinesis 343 QBREY AVENUE ST. PETE BEACH FL 33706 US			Mailing Address 34 COREY AVE ST PETERSBURG BEACH FL 33708-1816						
						3. Date Incorporated or Qualified 01/01/1990	3a. Date of Last Report 03/11/1996		
343	one of Business	Als	2a. Mailing Address 26) 343 CoRI	ey p	WE.	4. FEI Number 59-3045455		Ar	pplied For of Applicable
Suite, Apt	#, etc /		Suite. Apr. #, ptc. 27 5f. PE f.	BRACK	HA	5. Certificate of Status Desired			Additional equired
City & State S A A	nE	<u> </u>	City & Statu	¥	a .	Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zη: (4)	25		29 33706	Couple 30	10/45	1	Yes [] No	. 199.032,
		idress of Current Re	egistered Agent			10. Name and Address of New Re	pistered A	gent	
NIFO	NG, C.R.			81	Name				
34∯ COREY AVE ST PETERSBURG BEACH FL 33706				82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)	.—,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SI P	ETEHSBURG BEA	CH FL 33700		83	 				
				L					
				84	City		FL	85 Zip	Code
agent Le SIGNATURE	m taroihar with, and	accept the obligation	ns of, Section 607.0505, F	lorida Statute 16 Begistered Ag	y the corporations.		DATE		
12.	PO	OFFICERS AND DI	RECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR Change	RS IN 12
NAME	NIFONG, C.R.		C Detert	1.1 TITLE 1.2 NAME	{			L.J Change	L_) Audition
STREET ACTORETIS	341 COREY AVE			1	T ADDRESS				
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STACK EALDRESS				9	T ADDRESS				
CITY AT-Zer				5.5 STREE.	L L				
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AMEN!				62 NAME	}				
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14. If do hereby certify that the information supplied with this filling 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged on a pattern from two an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

197 360 5339

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