

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # L93502
1. Entity Name
INTERFACE REALTY CORPORATION, INC.



Principal Place of Business
**2300 GLADES RD., 230W
BOCA RATON, FL 33431 US**

Mailing Address
**2300 GLADES RD., 230W
? BOCA RATON, FL 33431 US**



01122004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0250622

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**GOODMAN, KENNETH J.
2300 GLADES RD., 230W
BOCA RATON, FL 33431**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GOODMAN, DANIEL R.
STREET ADDRESS	2300 GLADES RD 230W
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	D
NAME	GOODMAN, CAROL A.
STREET ADDRESS	1200 NORTH FEDERAL HWY #200
CITY-ST-ZIP	BOCA RATON, FL
TITLE	P
NAME	GOODMAN, KENNETH J
STREET ADDRESS	1200 NORTH FEDERAL HWY #200
CITY-ST-ZIP	BOCA RATON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/02/04-80127-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth J. Goodman 1/28/04 8617805260
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #