


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # M32170

1. Entity Name
INTERIOR DIMENSIONS OF SOUTH FLORIDA, INC.



Principal Place of Business 3324 W UNIVERSITY AVE. #231 GAINESVILLE, FL 32607	Mailing Address 3324 W UNIVERSITY AVE. #231 GAINESVILLE, FL 32607
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02242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FFI Number 59-2693896	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**FEINSTEIN, RICHARD
 3324 W UNIVERSITY AVE #231
 GAINESVILLE, FL 32607**

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 _____ DATE **05/21/08-80070-010 150.00**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when requesting)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVS FEINSTEIN, RICHARD 3324 W UNIVERSITY AVE #231 GAINESVILLE, FL 32607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FEINSTEIN, RICHARD 3324 W UNIVERSITY AVE #231 FORT LAUDERDALE, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 807, 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: *Richard Feinstein* Date: 4/24/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #