## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCU 1. Corporation	MENT # M5538	57 (1)			
	NTERIORS, INC.	. ,			
				A ARANGAN PAN ARAKA BURA ANDA ARAKA ANDA ANDA	ÁIL ÁIRÍN ÁIRIN GLAN PIOM NEOL
Principal Plac	ce of Business	Mailing Address			
835 HIBICUS		835 HIBISCUS LANE			
VERO BEACH FL 32963 VERO BEACH FL 32963					
U\$		US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address		07/10/1987 4. FEI Number	Applied For
21		26		59-2823804	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5, Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25 g. Name and Address of Currer	29	30	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
^-	SBORNE, MADELAINE BERT	it trogistered Agent	81 Name	10. Hame and Address of New Neglatered	Manr
	SOUTINE, MADELAINE BETT IS HIBISCUS LANE				
VERO BEACH FL 32963			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
**	INO DEPONTE OFFICE		83		
			4.1 0		· · · · · · · · · · · · · · · · · · ·
			84 City	FL	85 Zip Code
1. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	es, the above-named corp		of changing its registered
agent. Le	registered agent, or poth, in the State im familiar with, and accept the oblig	i of Florida. Such change was a ations of, Section 607.0505, Flo	authorized by the corpora orida Statutes.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	pointment as registered
SIGNATURE	Waddaused & Dist	irike/ O	padelaina.	B. Osbarna ian	21,98
<del></del>	Signature, typed or printed name of registered ag-	<del> </del>	Registered Agent signature requi	· · · · · · · · · · · · · · · · · · ·	
12.	OFFICERS AN	D DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	
NAME	OSBORNE, MADELAINE	ויין הכנונ	1.1 TITLE 1.2 NAME		Change Addition
STREET ADDRESS	835 HIBISCUS LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP		
TITLE	DP DE TOTAL	☐ DELETE	2.1 TITLE		Change Addition
NAME	BERTRAM, PAULINE M.	_	2.2 NAME		
STREET ADDRESS	835 HIBISCUS LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		2.4 CiTY-ST-ZIP		
TITLE	DVP	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	CHAFFEE, DOROTHY F.		3.2 NAME		
STREET ADDRESS	630 SANDFLY LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		3.4. CITY - S1 - ZIP		
TITLE		DELETE	4.1 1/TLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP		Change Addition
NAME			5.1 TITLE 5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		0~
CITY-ST-ZIP			5.4 City-St-ZiP		<b>み・</b> ン
TITLE		DELETE	6.1 TITLE	3000024191	Change Addition
NAME			6.2 NAME	<b>3000024191</b> -02/03/98010040	12
			_	***150.08	

6.4 CITY - ST- ZIP 14. I hereby certify that the information supplied with this filing 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 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 pranger, or on an attachment with an address.

**FILED** 

Feb 02 1998 8:00am

Secretary of State