

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000032063

1. Entity Name
PHYLLIS WRIGHT INTERIORS INC.



Principal Place of Business
7741 CEDAR HURST CT
LAKE WORTH, FL 33467

Mailing Address
7741 CEDAR HURST CT
LAKE WORTH, FL 33467



04132006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0996527

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WRIGHT, PHYLLIS
7741 CEDAR HURST CT
LAKE WORTH, FL 33467

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 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 WRIGHT, PHYLLIS
STREET ADDRESS 7741 CEDAR HURST CT
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE D
NAME WRIGHT, MICHAEL
STREET ADDRESS 7741 CEDAR HURST CT
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE
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CITY-ST-ZIP

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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 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: MICHAEL WRIGHT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/06 967 0810
Date Daytime Phone #