

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 03, 2004 8:00 am
Secretary of State

06-03-2004 90003 046 ***150.00

DOCUMENT # P00000047383

1. Entity Name

SUSAN VINTON DESIGN AND INTERIORS, INC.



Principal Place of Business

2683 NW 41ST STREET
BOCA RATON FL 33434

Mailing Address

2683 NW 41ST STREET
BOCA RATON FL 33434

54056537



MOORE

CR2E034 (11/03)

2. Principal Place of Business

2550 NW 52nd St
Suite, Apt. #, etc.

3. Mailing Address

2550 NW 52nd St
Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

Boca Raton FL

4. FEI Number

65-1005976

Applied For

Not Applicable

Zip

33496

Country

P. Beach

Zip

33496

Country

P. Beach

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VINTON, SUSAN
2683 NW 41ST STREET
BOCA RATON FL 33434

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

2550 NW 52nd St.

City

Boca Raton

FL

Zip Code

33496

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

Susan Vinton

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

(NOTE: Registered Agent signature required when reinstating)

5/23/04

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PTSD
NAME VINTON, SUSAN
STREET ADDRESS 2683 NW 41ST STREET
CITY-ST-ZIP BOCA RATON FL 33434

☒ Delete

address
only

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

2550 NW 52nd St.
Boca Raton FL 33496

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 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:

Susan Vinton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/23/04

Date

Daytime Phone #

561-994-6594

Attachment
Doc. # P00000047383
54056537

Dear Sirs:

I moved April
20 and recently
received this form.

Thanks -

Susan
Vonder

P.S. Pls. change
BOTH ADDRESSES