

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000114965

Entity Name: DOMAINE INTERIORS, INC.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

6100-3 APOPKA-VINELAND
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

6100-3 APOPKA-VINELAND
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-3688415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLATON, MICHELLE
8365 SANDBERRY BLVD
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SLATON, MICHELLE
Address: 6083 MASTERS BLVD
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: TOBEY, KATHLEEN
Address: 6088 MASTERS BLVD
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SLATON, MICHELLE
Address: 8365 SANDBERRY BLVD
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN TOBEY

VP

01/10/2005

Electronic Signature of Signing Officer or Director

Date