

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 MAY -2 AM 11:29

FILED

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P01000104869**1. Entity Name
INSPIRATIONS FOR CREATIVE DECOR, INC.Principal Place of Business
3928 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250Mailing Address
720 LAKE GENEVA DRIVE
ST. AUGUSTINE, FL 32092

11009749

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3752585

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GLAZIER, SCOTT L
8825 PERIMETER PARK BLVD.
SUITE 604
JACKSONVILLE, FL 32218

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

NOTE: Registered Agent Signature required when submitting.

DATE

9. Election Campaign Financing
Trust Fund Contribution.☐ \$5.00 May Be
Added to Fee

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PO
BORNA, RAMBOO
720 LAKE GENEVA DRIVE
ST. AUGUSTINE, FL 32082☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VST
BORNA, AMANDA
720 LAKE GENEVA DRIVE
ST. AUGUSTINE, FL 32082☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
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CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
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)(b), 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 license empowers 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 or without the empowered.

SIGNATURE:

Signature: *Scott L. Glazier*, President 4/21/03 904/270-1964

State Tax Fee: \$15.00 on Florida basis of business official on election

General Form 1

C0000001000000