

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000020277

Entity Name: INTERIORS FINE ART, INC.

FILED
Jun 15, 2005
Secretary of State

Current Principal Place of Business:

19213 SABAL LAKE DRIVE
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

19213 SABAL LAKE DRIVE
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: 01-0615363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMIER, RITA
19213 SABAL LAKE DRIVE
BOCA RATON, FL 33434 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LIND, TODD
Address: 6735 SW 195TH AVE
City-St-Zip: PEMBROKE PINES, FL 33332

Title: D () Delete
Name: DEMIER, RITA
Address: 19213 SABAL LAKE DRIVE
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: SILVA, ANDRES
Address: 19213 SABAL LAKE DRIVE
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANDRES SILVA

D

06/15/2005

Electronic Signature of Signing Officer or Director

Date