2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P02000024663

FILED Sep 08, 2003 8:00 am Secretary of State

08-18-2003 90162 026 ***150.00

1. Entity Name ELLEN JOY INTERIORS, INC. Principal Place of Business Mailing Address 55056040 4100 NORTH 43RD AVENUE 4100 NORTH 43RD AVENUE HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address 4054 3890 3990 AUE BUE Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For ELA H_{i} Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33021 33021 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LASKO, ELLEN Street Address (P.O. Box Number is Not Acceptable) 4100 NORTH 43RD AVENUE HOLLYWOOD FL 33021 City 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 agen (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be 👺 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Celete TITLE TITLE Change CILL LASKO LASKO, ELLEN NAME NAME 3890 N. 4064 AVE 4100 NORTH 43RD AVENUE STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-719

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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, 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:

Mills required

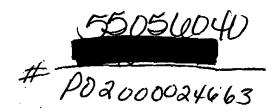
8 13/03

954-981-7143

Daytime Phone #

attachment

Ellen Joy Interiors, Inc. 3890 N. 40th Avenue Hollywood, Florida 33021 954-981-7143 FAX #954-894-0993



August 13, 2003

To Whom It May Concern:

Enclosed please find my check for \$150.00, I am asking you to waive the late fees as my application was sitting at the wrong address and I just received it today.

Yours truly, Cleu Justo Ellen Lasko Ellen Joy Interiors, Inc.