

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2003 8:00 am
Secretary of State

03-12-2003 90087 019 ***150.00

DOCUMENT # P02000025905

1. Entity Name
B & M INTERIORS, INC.



Principal Place of Business
~~2521 LINCOLN ST STE 211~~
~~HOLLYWOOD FL 33020~~

Mailing Address
~~2521 LINCOLN ST STE 211~~
~~HOLLYWOOD FL 33020~~

2. Principal Place of Business
416 Lakeview Dr.
Suite, Apt. #, etc.
apt. 106

3. Mailing Address
416 Lakeview Dr.
Suite, Apt. #, etc.
apt. 106

City & State
Weston, Fl.

City & State
Weston, Fl.

Zip
33326-2429

Country
USA

Zip
33326-2429

Country
USA

4. FEI Number
03-0400636

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

BOLIVAR, HENRY A
2521 LINCOLN ST STE 211
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name
BOLIVAR, Henry A.
Street Address (P.O. Box Number is Not Acceptable)
416 Lakeview Dr.
Apt. 106
City
Weston **FL** Zip Code
33326

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 *Henry A. BOLIVAR*
Signature, typed or printed name of registered agent and title if applicable.

Henry A. BOLIVAR
Registered Agent

02/27/03

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 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 **DP** ☒ Delete
NAME **BOLIVAR, HENRY A**
STREET ADDRESS **2521 LINCOLN ST STE 211**
CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE **DVS** ☒ Delete
NAME **MALAVE, SORELY D**
STREET ADDRESS **2521 LINCOLN ST STE 211**
CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ Change ☐ Addition
NAME **BOLIVAR, Henry A.**
STREET ADDRESS **416 LAkeview Dr.apt. 106**
CITY-ST-ZIP **Weston, Fl. 33326**

TITLE **DVS** ☒ Change ☐ Addition
NAME **MALAVE, Sorely D.**
STREET ADDRESS **416 LAkeview Dr. apt.106**
CITY-ST-ZIP **Weston, Fl. 33326**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Henry A. BOLIVAR* **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/27/03

Date

954-249-1658

Daytime Phone #

CR2E034 (10/02)