## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## **FILED** Jul 27, 2006 08:00 AN Secretary of State DOCUMENT # P02000077663 1. Entity Name JAMES VARIOT INTERIOR TRIM, INC. Principal Place of Business Mailing Address 1102-20TH ST W 1102-20TH ST W **BRADENTON FL 34205 BRADENTON FL 34205** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/06) Applied For 4. FEI Number City & State City & State 75-3070929 Not Apolicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VARIOT, JAMES M Street Address (P.O. Box Number is Not Acceptable) 1102 20TH ST W **BRADENTON FL 34205** 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 registere SIGNATURE FILE NOW!!! FEE IS \$550.00 \$.607.193(2)(b), F.S., allows for the waiver of the \$400.00 \$5.00 May Be 9. Election Campaign Financing DUE BY September 6, 2006 late fee. By checking this box, the corporation certifies it did Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State not receive prior notice. Fee to file is \$150.00. П OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PTD Addition Change Delete TITLE VARIOT, JAMES NAME NAME 1102-20TH ST W STREET ADDRESS STREET ADDRESS 1100000572433 **BRADENTON FL 34205** CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE ☐ Delete TITLE VARIOT, CHANDLER NAME NAME 1102 20TH ST W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34205** CITY-ST-ZIP CITY-ST-ZP ם Change Addition TITLE Delete ППЕ VARIOT, MATTHEW NAME NAME 2441 WEBBER STREET STREET ADDRESS STREET ADDRESS SARASOTA FL 34239 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete DHE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete MIF ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CIY-SI-ZP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.