2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

May 02, 2003 8:00 am Secretary of State P02000089317 DOCUMENT # 05-02-2003 90361 028 ***150.00 1. Entity Name ROMANTIC INTERIOR DESIGNS, INC. Principal Place of Business Mailing Address ** A A A A A A A A A 341 OLD JUPITER BEACH RD 341 OLD JUPITER BEACH RD JUPITER FL 33477 JUPITER FL 33477 2. Principal Place of Business 3. Mailing Address PO Box 2339 Suite, Apt. #, etc. Suite, Apt. #, etc. TO CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For Not Applicable 42-1558381 Jupiter FL Zio Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 33468 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CRUCE, LINDA Street Address (P.O. Box Number is Not Acceptable) 341 OLD JUPITER BEACH RD JUPITER FL 33477 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Delete ☐ Addition v CRUCE, LINDA NAME NAME 341 OLD JUPITER BEACH RD STREET ADDRESS STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition PST NAME Bud Palmieri STREET ADDRESS STREET ADDRESS 341 Old Jupiter Beach Road CITY-ST-ZIP CITY-ST-ZIP Jupiter, FL 33477 TITLE - Delete TITLE ☐-Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-7IP

SIGNATURE:

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