2005 FOR PROFIT CORPORATION ANNUAL REPORT

NAME STREET ADDRESS CITY-ST-ZIP

FILED May 02, 2005 08:00 AM Secretary of State DOCUMENT # P02000120613 1. Entity Name RIKLEM DRAPERIES AND CUSHIONS CORP. Principal Place of Business Mailing Address 19730 NW 54 PL 19730 NW 54 PL MIAMI, FL 33055 MIAMI, FL 33055 04102005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 42-1570929 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SERRANO, CLEMENTE 19730 NW 54 PL MIAMI, FL 33055 IN THIS SPACE 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 algnature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE SERRANO, CLEMENTE NAME STREET ADDRESS 19730 NW 54 PL MIAMI, FL 33055 CITY-ST-ZIP ST TITLE NAME RODRIGUEZ, RICARDO U00000357240 05/04/05-80065-024 150.00 19730 NW 54 PL STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33055 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a date if the empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR