

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000029710

FILED
Mar 09, 2005
Secretary of State

Entity Name: K.K. SCHWADE INTERIORS, INC.

Current Principal Place of Business:

9130 S. DADELAND BLVD., SUITE 1528
MIAMI, FL 33156

New Principal Place of Business:

7867 NORTH KENDALL DRIVE
105
MIAMI, FL 33156

Current Mailing Address:

9130 S. DADELAND BLVD., SUITE 1528
MIAMI, FL 33156

New Mailing Address:

7867 NORTH KENDALL DRIVE
105
MIAMI, FL 33156

FEI Number: 16-1661074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PINKERT, STEVEN
9130 S. DADELAND BLVD., SUITE 1528
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

PINKERT, STEVEN
9130 S. DADELAND BLVD.
1528
MIAMI, FL 33156 US

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.

SIGNATURE:

03/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHWADE, KARYN K
Address: 9130 S. DADELAND BLVD., SUITE 1528
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: SCHWADE, JAMES G
Address: 9130 S. DADELAND BLVD., SUITE 1528
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHWADE, KARYN K
Address: 10201 SABAL PALM AVENUE
City-St-Zip: CORAL GABLES, FL 33156

Title: D (X) Change () Addition
Name: SCHWADE, JAMES G
Address: 10201 SABAL PALM AVENUE
City-St-Zip: CORAL GABLES, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES SCHWADE

D

03/09/2005

Electronic Signature of Signing Officer or Director

Date