2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102046

Entity Name: INTERIOR CONCEPTS OF TAMARAC, INC.

FILED Aug 31, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

7542 W MCNAB RD

D23

NORTH LAUDERDALE, FL 33068

Current Mailing Address: New Mailing Address:

7542 W MCNAB RD

D23

NORTH LAUDERDALE, FL 33068

FEI Number: 16-1683738 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PEREZ, HECTOR L
7050 SOUTHGATE BLVD STE 104
TAMARAC, FL 33321 US
PEREZ, HECTOR L
7542 W. MCNAB RD.
D-23

AMARAC, FL 33321 US D-23 TAMARAC, FL 33068 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: 08/31/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

Name: PEREZ, HECTOR L
Address: 7050 SOUTHGATE BLVD STE 104
Address: 7542 W. MCNAB RD. D-23

City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33068

Title: DVS () Delete Title: () Change () Addition

 Name:
 MARTINEZ, RAFAEL
 Name:

 Address:
 6247 SW 21 STREET
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33068
 City-St-Zip:

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: HECTOR L. PEREZ DP 08/31/2005