## 2007 FOR PROFIT CORPORATION

**FILED** Mar 19, 2007 08:00 AM te

ANNUAL REPORT				Secretary of Star		
DOCUMENT # P030		Secretary of Sta				
CAM INTERIORS, INC.						
Principal Place of Business 2190 RIVER BIRCH ROAD	Mailing Address	MD.				
GULF BREEZE, FL 32563	2190 RIVER BIRCH RO GULF BREEZE, FL 325					
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DO NOT W	DITE IN TUIC C	DACE	03112007	No Chg-P	CR2E034 (11/05)	
DO NOT W	RITE IN THIS S	PACE	4. FEI Numl 41-21		Applied Not Ap	d For oplicable
C Nove and Address	of Courses Providence Association	<del></del>	5. Certificat	e of Status Desired	\$8.75 Addition.	ıal
MAYO, CLIFFORD A	of Current Registered Agent		50	NOT W	(F) (T) F	
2190 RIVER BIRCH ROAD GULF BREEZE, FL 32563				NOT W		
			IIN	THIS SF	ACE	
The above named entity submits this the obligations of registered agent.	statement for the purpose of changing its	registered office or regi	stered agent, or b	oth, in the State of Fl	orida. I am familiar with, and	accept
SIGNATURE	egistered agent and title if applicable (NOTE	. Flora visual de la companya de la			0.75	
FILE NOW!!! FEE IS \$1 After May 1, 2007 Fee will I	50.00 9. Election Campaig	gn Financing	\$5.00 May Be Added to Fees	000000 03/28/07-	0671032 -80011-021 150.0	<del></del>
1	ICERS AND DIRECTORS		•			
NAME MAYO, CLIFFORD A	040					
STREET ADDRESS 2190 RIVER BIRCH RI CITY-ST-ZIP GULF BREEZE, FL 32						
TITLE NAME						
STREET ADDRESS CITY-ST-ZIP		ļ				
TITLE						
NAME STREET ADDRESS			<b>DO</b>	NOT IA	/DITE	
CITY-ST-ZIP TITLE				NOT W		
NAME			IN	THIS SI	PACE	
STREET ADDRESS CITY-S1-ZIP						
TITLE NAME						
STREET ADDRESS CITY-ST-ZIP		į				
TITLE						

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 attack mergy with an address, with all other like empowered.

Clifford A

SIGNATURE:

NAME STREET ADDRESS

ATURE AND TYPEO'OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mair

Daytime Phone #