

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000139080

1. Entity Name
BETH MINDLIN INTERIORS, INC.



Principal Place of Business
564 CAMBRIDGE CIRCLE
SOUTH DAYTONA, FL 32119

Mailing Address
564 CAMBRIDGE CIRCLE
SOUTH DAYTONA, FL 32119



02012005 No Chg-P CR2E034 (10/03)

4. FEI Number
20-0439324

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MINDLIN, BETH
564 CAMBRIDGE CIRCLE
SOUTH DAYTONA, FL 32119

**DO NOT WRITE
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 signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE P
NAME MINDLIN, BETH
STREET ADDRESS 564 CAMBRIDGE CIRCLE
CITY-ST-ZIP SOUTH DAYTONA, FL 32119

TITLE V
NAME MINDLIN, DAVID
STREET ADDRESS 564 CAMBRIDGE CIRCLE
CITY-ST-ZIP SOUTH DAYTONA, FL 32119

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 attachment with an address, with all other like empowered.

SIGNATURE: *David Mindlin* **DAVID MINDLIN, VICE PRES.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-4-05

Date

(386) 788-8660

Daytime Phone #