

DOCUMENT # P05000094224

1. Entity Name

PEREIRA INTERIORS, INC.



**FILED**  
**Jan 09, 2008 8:00 am** —  
**Secretary of State**

01-09-2008 90011 045 \*\*\*750.00

Principal Place of Business  
 2351 S. DOUGLAS ROAD  
 STE: 712  
 CORAL GABLES FL 33145

Mailing Address  
 2351 S. DOUGLAS ROAD  
 STE: 712  
 CORAL GABLES FL 33145

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number 20-5747794

Applied For  
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

2nd MOORE

CR2E034 (4/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PEREIRA, CHARLES III  
 2351 S. DOUGLAS ROAD  
 STE: 712  
 CORAL GABLES FL 33145

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

CHARLES PEREIRA III

12-29-07

FILE NOW!!! FEE IS \$550.00

DUE BY September 5, 2007

Make Check Payable to Florida Department of State

S 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
 NAME PEREIRA, CHARLES III  
 STREET ADDRESS 2351 S. DOUGLAS ROAD STE: 712  
 CITY-ST-ZIP CORAL GABLES FL 33145

TITLE VSD ☒ Delete  
 NAME DURAN, RAUL  
 STREET ADDRESS 2351 S. DOUGLAS ROAD STE: 712  
 CITY-ST-ZIP CORAL GABLES FL 33145

TITLE TD ☐ Delete  
 NAME PEREIRA, CHARLES II  
 STREET ADDRESS 2351 S. DOUGLAS ROAD, STE. 712  
 CITY-ST-ZIP CORAL GABLES FL 33145

TITLE D ☐ Delete  
 NAME OSMAN, MAGGY  
 STREET ADDRESS 2351 S. DOUGLAS ROAD, STE. 712  
 CITY-ST-ZIP CORAL GABLES FL 33145

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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 reports 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CHARLES PEREIRA III

12-29-07