


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2007 8:00 am**  
**Secretary of State**

04-18-2007 90159 050 \*\*\*150.00

<b>DOCUMENT # P06000018626</b> 1. Entity Name <b>INTERIOR TRIMMING OF FLORIDA, INC.</b>					
Principal Place of Business <b>4378 CREEKSIDE BLVD</b> <b>KISSIMMEE, FL 34746 US</b>			Mailing Address <b>4378 CREEKSIDE BLVD</b> <b>KISSIMMEE, FL 34746 US</b>		
2. Principal Place of Business - No P.O. Box # <b>2706 BARTLET DR.</b> Suite, Apt. #, etc.		3. Mailing Address <b>2706 BARTLET DR.</b> Suite, Apt. #, etc.			
City & State <b>KISSIMMEE, FL</b> Zip <b>34741</b>		City & State <b>KISSIMMEE, FL</b> Zip <b>34741</b>		4. FEI Number <b>05-0632435</b> Applied For <input type="checkbox"/> Not Applicable	
Country <b>USA</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE COMPANY</b> <b>1201 HAYS STREET</b> <b>TALLAHASSEE, FL 32301</b>				7. Name and Address of New Registered Agent Name <b>AKM S HUSSAIN</b> Street Address (P.O. Box Number is Not Acceptable) <b>2706 BARTLET DR.</b> City <b>KISSIMMEE</b> <b>FL</b> Zip Code <b>34741</b>	
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 <u><i>A.K.M. Shakkawat Hussain</i></u> <b>AKM S HUSSAIN</b> <b>4/15/07</b> <small>Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>HUSSAIN, AKM S</b> <b>4378 CREEKSIDE BLVD</b> <b>KISSIMMEE, FL 34746</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT</b> <b>AKM S HUSSAIN</b> <b>2706 BARTLET DR.</b> <b>KISSIMMEE, FL 34741</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SECRETARY</b> <b>ANGELA HUSSAIN</b> <b>2706 BARTLET DR.</b> <b>KISSIMMEE, FL 34741</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VICE PRESIDENT</b> <b>MOHAMMED J. HOSSAIN</b> <b>5587 WILLOW BEND TR</b> <b>KISSIMMEE, FL 34758</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>A.K.M. Shakkawat Hussain</i></u> <b>AKM S HUSSAIN</b> <b>4/15/07</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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04152007 Chg-P CR2E034 (12/06)

407-810-8420