

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000046377

1. Entity Name
REFRESH INTERIORS INC.



FILED
Sep 10, 2008 08:00 AM
Secretary of State

Principal Place of Business
1201 34TH AVENUE NORTH
ST. PETERSBURG, FL 33704

Mailing Address
1201 34TH AVENUE NORTH
ST. PETERSBURG, FL 33704



09082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
71-1001690

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MCDONALD, EUGENE J
1201 34TH AVENUE NORTH
ST. PETERSBURG, FL 33704

**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 Eugene J. McDonald / EUGENE MCDONALD PRESIDENT 9/8/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

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

U000000959362
09/10/08-80001-001 550.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
MCDONALD, EUGENE J
1201 34TH AVENUE NORTH
ST. PETERSBURG, FL 33704

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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 Eugene J. McDonald / EUGENE MCDONALD, PRESIDENT 9/8/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #