

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000050330

FILED
Apr 24, 2007
Secretary of State

Entity Name: ROOMSCAPES OF N. FLORIDA, INC

Current Principal Place of Business:

12642 ASHMORE GREEN DR N
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

12642 ASHMORE GREEN DR N
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 20-4660581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOMON, ROBIN J
12642 ASHMORE GREEN DR N
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: SOLOMON, ROBIN J
Address: 12642 ASHMORE GREEN DR N
City-St-Zip: JACKSONVILLE, FL 32246

Title: VPS () Delete
Name: DOTY, CYNTHIA S
Address: 1801 PELICAN COURT
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBIN J SOLOMON

PT

04/24/2007

Electronic Signature of Signing Officer or Director

Date