

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000063759

FILED  
May 04, 2009  
Secretary of State

Entity Name: DEL MAR INTERIORS INC.

**Current Principal Place of Business:**

37 NE 1ST TERR  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

37 NE 1ST TERR  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

FEI Number: 06-1776777      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAZZA, NICOLAS  
1311 SW 19TH ST.  
BOCA RATON, FL 33486      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: MAZZA, NICOLAS  
Address: 1311 SW 19TH ST.  
City-St-Zip: BOCA RATON, FL 33486

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP      ( ) Change (X) Addition  
Name: MAZZA, DOMENIC  
Address: 3700 GALT OCEAN DR  
City-St-Zip: FT LAUDERDALE, FL 33441

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: NICOLAS

P

05/04/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date