2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 26, 2007 8:00 am Secretary of State

DOCUMENT # P06000099857 1. Entity Name MULIERI INTERIOR DESIGN COMPANY								02-01-2001	7 90033	005 ***1	.50.00									
Principal Place of Business 611 RACQUET CLUB ROAD SUITE 3 WESTON, FL 33332			6° St	iling Address 11 RACQUET CLUB RI JITE 3 ESTON, FL 33332			AN ARMIN SIANI BAND RAVIN AR	M 88118 1811 I	TIEZ JEIEL EZIM IT	1 1783 7 it 1882										
2. Principal Place of Business - No P.O. Box #			3. N	3. Mailing Address																
Suite, Apt. #, etc.			5	Suite, Apt. #, etc.		01292007	Chg-P	CR2E	34 (12/06)											
City & State			C	City & State		4. FEI Namb	20-529	6815		pplied For ot Applicable										
Zip	Country			Z-p Cour		try	5. Certificate	e of Status Desired	O.	\$8.75 Ad Fee Require										
6. Name and Address of Current				ered Agent		7. Name and	d Address of New F	Registered .	Agent											
MULIERI, ROBERTO 611 RACQUET CLUB ROAD						Name Street Address (P.O. Box Number is Not Acceptable)														
SUITE 3																				
WESTON, FL 33332						City		·=	FL	Zip Coo	ie									
8. The above	named entil	ly submits this statement t	or the p	urpose of changing its	register	ed office or regis	stered agent, or bo	oth, in the State of Fi			and accept									
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 Fforida. I am familiar with, and accept the obligations of registered agent																				
SIGNATURE Signature, typicu or primied nemiu of regularical injuris mini little if applicabile (INOTE: Regulation Agunts skyriature inquired innu									DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution.							\$5.00 May Be Added to Fees			_										
10.	r=	OFFICERS AND	DIREC		11.		ADDITIONS	CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11									
TITLE NAME	P Dekte III MULIERI, ROBERTO					F F				Change	Addition									
STREET ADDRESS	611 RAC	QUET CLUB, SUITE 3			ET ADDRESS															
TITLE	WESTON, FL 33332 CII					-ST-7IP				☐ Change	☐ Addition									
NAME	, MA									CI Ciendo										
STREET ADDRESS CITY-ST-7#P	·					ET ADORESS -ST-ZIP														
IIILE	☐ Doiete 1111.					L				☐ Change	Addition									
NAME STREET ADDRESS				•	NAM STRE	ET ADDRESS														
CITY-ST-ZIP						-S1-21P														
TITLE NAME	Ì			Delete	11116					☐ Change	Addition									
STREET ADDRESS	l				- NAM Stre	ET ADORESS														
CITY-SI-ZIP					CITY	-S1-20P														
NAME	,			Deluic Deluic	TITLE	1				Change	Addition									
STREET ADDRESS						ET ADDRESS														
CITY-\$1-ZEP	<u> </u>				-	-S1-2IP				C) 61										
NAME				Delete	TITLI NAM					☐ Change	☐ Addition									
STREET ADDRESS CITY-ST-ZIP		•				ET ADDRESS -ST-ZIF														
12. Thereby certify that the information supplied with this filling does not quality 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 it made under earth; 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.																				
SIGNAT	UKE:-	CRINATURE AND TYPED OR	PRINTED	HAME OF EXCHING OFFICER	OR DERECT	TOR		Duty	D	SIGNATURE: SUPPLY ON PRINTED ON PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Date Despire Provis a										