

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000010856

FILED  
Aug 26, 2008  
Secretary of State

Entity Name: INTERIORS BY MANNY, INC.

## Current Principal Place of Business:

962 SW MC COMB AVE  
PORT SAINT LUCIE, FL 34953

## New Principal Place of Business:

## Current Mailing Address:

962 SW MC COMB AVE  
PORT SAINT LUCIE, FL 34953

## New Mailing Address:

FEI Number: 75-3229773

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARMENDAREZ, MANUEL  
962 SW MC COMB AVE  
PORT SAINT LUCIE, FL 34953 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: ARMENDAREZ, MANUEL  
Address: 962 SW MC COMB AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP ( ) Delete  
Name: ARMENDARIZ, JUAN B  
Address: 6750 SW 20 ST  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: SEC ( ) Delete  
Name: ARMENDARIZ, MANUEL P  
Address: 964 SW CASTANEDA LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change ( ) Addition  
Name: ARMENDARIZ, MANUEL P  
Address: 964 SW CASTANEDA LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: MANUEL ARMENDAREZ

P

08/26/2008

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

\_\_\_\_\_  
Date