

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000047524

Entity Name: INTERIORS "R" US, INC.

FILED
Oct 15, 2008
Secretary of State

Current Principal Place of Business:

11805 NE 36TH AVENUE
ANTHONY, FL 32617 US

New Principal Place of Business:

625 SE SANCHEZ DRIVE
APARTMENT C
OCALA, FL 34471 US

Current Mailing Address:

11805 NE 36TH AVENUE
ANTHONY, FL 32617 US

New Mailing Address:

625 SE SANCHEZ DRIVE
APARTMENT C
OCALA, FL 34471 US

FEI Number: 20-8863999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, GEORGE
1515 E SILVER SPRINGS BLVD,
SUITE 128
OCALA, FL 34470 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: GEORGE ORTIZ

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: D/P () Delete
Name: CONNELL, STEVEN M
Address: 11805 NE 36TH AVENUE
City-St-Zip: ANTHONY, FL 32617 US

Title: VP/S () Delete
Name: CONNELL, STEVEN M
Address: 11805 NE 36TH AVENUE
City-St-Zip: ANTHONY, FL 32617 US

Title: T () Delete
Name: CONNELL, STEVEN M
Address: 11805 NE 36TH AVENUE
City-St-Zip: ANTHONY, FL 32617 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: CONNELL, STEVEN M
Address: 625 SE SANCHEZ DRIVE, APARTMENT C
City-St-Zip: OCALA, FL 34471 US

Title: VP/S (X) Change () Addition
Name: CONNELL, STEVEN M
Address: 625 SE SANCHEZ DRIVE, APARTMENT C
City-St-Zip: OCALA, FL 34471 US

Title: T (X) Change () Addition
Name: CONNELL, STEVEN M
Address: 625 SE SANCHEZ DRIVE, APARTMENT C
City-St-Zip: OCALA, FL 34471 US

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: STEVEN M CONNELL

D/P

10/15/2008

Electronic Signature of Signing Officer or Director

Date