## 2008 FOR PROFIT CORPORATION

## FILED May 27, 2008 8:00 am Secretary of State

ANNUAL REPURI					Secretary or State			
DOCUMENT # P0700090026  1. Entity Name GLOBAL HOSPITALITY INTERIORS, INC.						90044 002 ***15		
Principal Place of Business 2710 SOUTH PARK ROAD HALLANDALE, FL 33009 US		Mailing Address 2710 SOUTH PARK ROAD HALLANDALE, FL 33009 US		L INETIANT III	 	88118 1814 88111 88118 11818 BI		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05192008	Chg-P	CR2E034 (12/06)		
City & State		City & State		4. FEI Number 26 -	070090		plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New Re	gistered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			Name Street Add	Name STEVE VETA 05 KY Street Address (P.O. Box Number is Not Acceptable)				
,	7-7,	City		1710 Sou	not fall	FL ABOO	3.50	
The above named entity submits this statement for the purpose of changing its registered office or not the obligations of registered opent.				egistered agent, or both	h, in the State of Flor	ida. I am familiar with,	and accept	
SIGNATURE								
FILE NOW!!! FEE IS \$150.00  Due by September 12, 2008  9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	In accordance wi corporation did n	ith s. 607.193(2)(b), ot receive the prior r	F.S., the notice.	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/	CHANGES TO OFFIC	CERS AND DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D PETROSKY, STEVE 2710 SOUTH PARK ROAD HALLANDALE, FL 33009	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP-		☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	

12. I hereby certify that the information supplied with the filling does not qualify 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 if made under oath; that I am an officer or director of the corporation or the receiver or trubbee 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.

SIGNATURE: \_

SIGNATURE AND THEO OBSTRINTED NAME OF SIGNING OFFICER OR DIRECTOR