

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 AM 11:30

DOCUMENT # P92000012412 (2)

1. Corporation Name

SOUTH FLORIDA INTERIORS, INC.

Principal Place of Business

4691 N. UNIVERSITY DR., #368
CORAL SPRINGS FL 33067

Mailing Address

5313 NW 84TH WAY
CORAL SPRINGS FL 33067
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1992

3a. Date of Last Report

03/21/1994

4. FEI Number

65-0380342

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SIDWEBER, ROBERT W
2929 E. COMMERCIAL BLVD.
SUITE 702
FORT LAUDERDALE FL 33308

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature typed in printed letters or registered typed letters if appropriate)

(If (b) Registered Agent signature required and when registering)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME
COBB, STUART
STREET ADDRESS
2024 HOLLYWOOD BLVD.
CITY, ST, ZIP
HOLLYWOOD FL 33020
4691 N. University Dr.
Coral Springs FL
33067

14 NAME
15 STREET ADDRESS
16 CITY, ST, ZIP

☐ Change ☐ Addition

NAME
COBB, STUART
STREET ADDRESS
2024 HOLLYWOOD BLVD.
CITY, ST, ZIP
HOLLYWOOD FL 33020

17 NAME
18 STREET ADDRESS
19 CITY, ST, ZIP

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

20 NAME
21 STREET ADDRESS
22 CITY, ST, ZIP

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

23 NAME
24 STREET ADDRESS
25 CITY, ST, ZIP

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

26 NAME
27 STREET ADDRESS
28 CITY, ST, ZIP

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

29 NAME
30 STREET ADDRESS
31 CITY, ST, ZIP

☐ Change ☐ Addition

14. I, the Secretary, certify that the information supplied with this filing is voluntarily furnished and does not equally for the corporation. I further certify that the information included on this annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed or on an attachment with an address.

SIGNATURE:

Signature and typed name of signing officer or director

1-7-95

Exempt From Fee