

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 01 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P93000046885 (8)

1. Corporation Name

NYLANDER INTERIORS INC.



Principal Place of Business

30071 S.W. 148TH AVE.  
LEISURE CITY FL 33033  
US

Mailing Address

30071 S.W. 148TH AVE.  
LEISURE CITY FL 33033  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/06/1993

4. FEI Number

65-0420465

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

389 NW 2nd ST

Suite, Apt. #, etc.

2a. Mailing Address

389 NW 2nd ST

Suite, Apt. #, etc.

City & State

Florida City, FL

City & State

Florida City, FL

Zip

33034

Country

US

Zip

33034

Country

US

9. Name and Address of Current Registered Agent

NYLANDER, DAVID SR  
30071 SW 148 AVE.  
LEISURE CITY FL 33033

10. Name and Address of New Registered Agent

81 Name

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

389 NW 2nd ST

83

84 City

Florida City

FL

85 Zip Code

33034

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

David G. Linder Sr. U.P.

(NOTE: Registered Agent signature required when reinstalling)

4/27/98

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME NYLANDER, VERNA  
STREET ADDRESS 30071 SW 148TH AVE.  
CITY-ST-ZIP LEISURE CITY FL  
☐ DELETE

TITLE V  
NAME NYLANDER, DAVID  
STREET ADDRESS 30071 S.W. 148TH AVE.  
CITY-ST-ZIP LEISURE CITY FL  
☐ DELETE

TITLE V  
NAME NYLANDER, DAVID JR.  
STREET ADDRESS 30111 SW 158TH AVE  
CITY-ST-ZIP HOMESTEAD FL  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 389 NW 2nd ST  
1.4 CITY-ST-ZIP Florida City, FL 33034  
☐ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 389 NW 2nd ST  
2.4 CITY-ST-ZIP Florida City, FL 33034  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 if changed, or on an attachment with an address.

SIGNATURE:

David G. Linder Sr.

4/27/98 30071 SW 148 AVE

CR2E034 (10/97)