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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

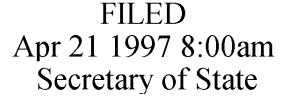
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300056061 (3)

OCEANIA INTERIORS, INC.

Principal Place of Business

Mailing Address





MIAMI BEACH		MIAMI BEACH FL 33160-455	MIAMI BEACH FL 33160-4555				
					3. Date Incorporated or Qualified 08/10/1993	3a. Date of Last F	Report
— · / · / ·	Place of Business OD COLLINS AVE	2a. Mailing Address		Acc	4. FEI Number		pplied For
21 64 (Suite, Apt.		26 / 6400 (°O Suite, Apt. #, etc.	LUIN	3 1700	65-0432587		ot Applicable
22		27			5. Certificate of Status Desired		Additional oquired
City & Stat	IMI BEAUT FL	City & State 28 MIAMI BE	ACIT,	FL	6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
zip 33) 160 Country 25	29 33160 s	Countr	у	8. This corporation has liability for in Florida Statutes	ntangible tax under s Yes 🏻 No	s. 199.032,
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent	
	IKOW, GERALD		81	Name	I		
16445 COLLINS AVE MIAMI BEACH FL 33160			82	82 Street Address (P.O. Box Number is Not Acceptable)			
· · ·	WII DENOTT E COTO		83				
\$***			84	City		FL 85 Zip	Code
11. Pursuant office or r agent. I s	to the provisions of Sections 607.0502 registered agont, or both, in the State of am familiar with, and accept the obligat	and 607.1508, Florida Statutes of Florida: Such change was autions of, Section 607.0505, Flori	s, the above thorized beds Statute	I re-named cor y the corpora s.	rporation submits this statement for the pu ation's board of directors. I hereby accep		ts registered registered
SIGNATURE							
12.	Signature, typod or printed name of registered agree OFFICERS AND		Hegistered Ag	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	OC IN 12
TITLE	D	DELETE	1.1 TOLE	T7	0/s/0	Change	Addition
NAME	KLEIKAMP, GERTI		1.2 NAME	فرا	Le Vous Carlo	7	
STREET ADDRESS	16445 COLLINS AVE		1.3 STREF	1 ADDRESS	400 Collins Au		
CITY-ST-ZIP	MIAMI BEACH FL 33160		1.4 CITY-	S1-ZIP	diany beach pl	33160	
,TITLE	DT	☐ DELETE	2.1 TITLE		e de la companya de l	Change	Addition
NAME	PANKOW, GERALD		22 NAME		PANKOW GERALD	,	
STREET ADDRESS	16445 COLLINS AVENUE		2 3 STREE	ADDRESS .	6400 COLLINS AVE		
CITY-ST-ZIP	MIAMI BEACH FL	D DELETE	2. 4 D/TY-	SI-ZIP /	MIAMI BEACH, FL 3:	3160	
TITLE		☐ DELFTE	3.1 TiTLE			Change	Addition
NAME Street Address			3.2 NAME				
CITY-ST-ZIP			3.3 STREE				
TITLE		DELETE	3.4 CITY- 4.1 TITLE	S1-ZIP		Change	Addition
NAME			4. 2 NAME			Ghange	ADDITION
STREET ADDRESS			•	ADDRESS			
CITY-ST-ZIP			4.4 CITY-3				
TITLE		DELETE	5.1 THLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CHY-5	ST - ZIP			
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME]
STREET ADDRESS			6.3 STREE	ADDRESS		*	
CITY-ST-ZIP			6.4 CHY - 3	51-21P			

I do 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 supplied entail 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 contact the corporation with an address.