## 2004 FOR PROFIT CORPORATION

TITLE NAME STREET ADDRESS CITY-ST-ZIP

## OOLOO ANT

	ANNUAL R	REPORT	/ 24.4		Jun 10, 21	004 08:00 AM
DOCUMENT # P93000057753  1. Entity Name LAMPS AND SHADES BY DANOR, INC.					Secret	ary of State
5501 N. FEI	DERAL HWY	Aailing Address 5501 N. FEDERAL HWY BOCA RATON, FL 33487 U	S			
E	OO NOT WRITE I	CE	03132003 4. FEI Numb 59-193	No Chg-P	CR2E034 (10/03)  Applied For Not Applicable  \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  ROSENTHAL, STUART S ESQ 404 EAST ATLANTIC BLVD SUITE 101 POMPANO BEACH, FL 33060				•	NOT W	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE						
FILE NOWIII FEE IS \$150.00 9. Election Campaign Fina Due by September 8, 2004 Trust Fund Contribution.				\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PSD YOULOVSKY, TED 5501 N. FEDERAL HIGHWAY BOCA RATON, FL 33487	CTORS			U00000	162701 80002-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VPTD YOULOVSKY, GLADYS 5501 N. FEDERAL HIGHWAY BOCA RATON, FL 33487					 
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE
NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				ه مسلمه واستفد		

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 trustee 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.