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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 19 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000068072 (6)

CRISTY'S INTERIOR DESIGNS, INC.

Principal Place	e of Business	Mailing Address				
8741 S.W. 24TH ST.		6741 S.W. 24TH ST.				
#13		#13		<i>'</i>		
MIAMI FL 9315	5	MIAMI FL 33155-1765				
					3. Date Incorporated or Qualified 09/30/1993	3a. Date of Last Report 07/26/1996
· ·	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		65-0443324	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Ζίρ	Country	Z ip	Countr	у .	8. This corporation has liability fo	
24	[25]	29	30			Yes No
	9, Name and Address of Currer	it Registered Agent	81	Mama	10. Name and Address of New R	legistered Agent
	EZ, BLAS L			Name		
6/4` #13	1 S.W. 24TH ST.		82	Street Add	ress (P.O. Box Number is Not Accepta	able)
	MI FL 33155		83		THE R. P. LEWIS CO., LANSING MICH. SHAPE STREET, ST. LEWIS CO., LANSING MICH.	
			84	City		85 Zip Code
11. Pursuant to office or reagent. La	to the provisions of Sections 607.050 agistered agont, or both, in the State m familiar with, and accept the oblig-	2 and 607.1508, Florida Stat of Florida Such change was alions of, Section 607.0505,	J utes, the abov s authorized b Florida Statute	L re-named corp y the corpora is.	poration submits this statement for the tion's board of directors. I hereby according	purpose of changing its registered ept the appointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered ago OFFICERS AN		JIL Hegislerco Ag	cht signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFF	DATE
TITLE	P	DOLLETE	1.1 TITLE	T	ADDITIONS/OFFANGES TO OFF	Change Addition
NAME	LOPEZ, BLAS L		1.2 NAME			
STREET ADDRESS	6741 S.W. 24TH ST. #13		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33155		1.4 C(1) - S1 - Z(P			
TITLE	ST	DELETE	2.1 TITLE			Change Addition
NAME	LOPEZ, BLAS L		2.2 NAME			
STREET ADDRESS	6741 S.W. 24TH ST. #13		2.3 STREE	1 ADDRESS		
CITY-ST-ZIP	Miami FL 33155		2. 4 CITY-	S1-ZIP		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	1 ADDRESS		
CITY-ST-ZIP			3.4. CHY-	\$1 - 7IP		
THLE	DELETE 4		4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	1 ADDRESS		
CITY-ST-ZIP			4.4 CHY-	S1 - 7/P		
TITLE	DELETE		5.1 11TLF			Change Addition
NAME			5.2 NAME			10016
STREET ADDRESS			5.3 STREE	TADDRESS		VB 3717
CITY-ST-ZIP			5.4 CITY-1	S1 - 7(P		
TITLE		☐ DELETE	61 TITLE		7000021	Addition
NAME			-			
			62 NAME		7000021: -03/19/97010 ***165.00	0 15 039

14. 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 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.