SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P93000070723 (0) DOCUMENT # INTERNATIONAL DECORATORS, INC. Principal Place of Business Mailing Address 1620 NW 46TH AVE 1620 NW 46TH AVE UNIT 12 **UNIT 12** LAUDERHILL FL 33313 LAUDERHILL FL 33313 3. Date Incorporated or Qualified 3a. Date of Last Report 10/12/1993 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number oth Applied For ٥كګيا NW 26 65-0470155 Not Applicable Sulle, Apt.#, etc Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desirent 27 Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has list: lity for intangible tax under s. 199 032 25 29 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HEMANS, GEOFFREY 4350 NW 12TH CT Street Address (P.O. Box Number is Not Acceptable) 82 LAUDERHILL FL 33313 83 84 City 85 Zip Code FL 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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607,0505, Fiorida Statutes. Signative it, and property or processor religioned a post and relied applicable. (NOTE Riginary of Agents specure respectation in a state of 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3.6)TIBLE DELETE 1.1 TILLE Change Addition HEMANS, GEOFFREY NAME 1.2 NAME **CR2E034** 1620 NW 46TH AVE UNIT 12 STREET ADDRESS 1.3 STREET ADDRESS LAUDERHILL FL 33313 CiTY-ST-ZIP 1.4 CI"Y - ST - ZIP TITLE DELETE 21 DRLE Change Addition NAME 2.2 NAM5 STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2 4 Cify - ST- ZiF TITLE DELETE 3 1 TIFLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST-ZIP 4.4 CiTy - ST - ZIP TITLE DELETE 5.1 BUE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 DILE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption states in Section 119 07(3)(k). Florida Statutes if 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 logal effect as if made under onth, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. President 13/96 308 862 1387