PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400001153

 Corporation 		•						
DAVE RO	DE INTERIORS, INC.			,	į	*	421 4610 1 (1 48) (1 48) (HOO 1711 / HOI
		•						IROO IKII KOOK
Principal Plac	e of Business	Mailing Address						
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608 SUNSET DR. 608 SUNSET DR. BRANDON FL 33511						DO NOT WEITE IN T	LIC SDACE	•
DRANDONTE		•				DO NOT WRITE IN T	HIS SPACE	
	• •					3. Date Incorporated or Qualifed		ļ
						01/01/1994		lied For
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number	 - 	lied For
- - -		26	_			59-3216517		Applicable
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Re			
	· · · · · · · · · · · · · · · · · · ·	27						
City & Sta	te	City & State				6. Election Campaign Financing	\$5.00	
<u></u>		28				Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Coun	itry		8. This corporation owes the current year	r Intangible	
├ ─ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	25	29	30			Personal Property Tax.		□No
24	9. Name and Address of Current					10. Name and Address of New Registe	red Agent	
	روق الإسالي			81	Name			.
BE/	AM-RUCKER, MILDRED		-	82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
	EAST KENNEDY BLVD.				Super Addic	The second of th	.	Anna liver
SUITE 1400			F	83	 	· · · · · · · · · · · · · · · · · · ·		
	MPA FL 33602		.	_		1	85 Zip (ode
ļ	•			84	City		FLIII	•
wasan malakan s		n 1007 4500 Florida Stat	utos the ab	2016	a-named como	oration submits this statement for the purpos n's board of directors. I hereby accept the a	e of changing its	registered
11) Pursuan	t to the provisions of Sections 607.050.	of Florida. Such change was	authorized	by	the corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the a	ppointment as re	gisterea
agent. I	registered agent, or both, in the State of am familiar with, and accept the obligat	tions of, Section 607.0505, F	lorida Statu	ites.	•	•		
SIGNATURE	<u></u> _				t signature required	when reinstating) DAT	E .]
	Signature, typed or printed name of registered agen	nt and title if applicable. (NC ID DIRECTORS	13.	Agen	i agriciare requires	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12
12		DELETE	3,1 111	1F		11. 11. 11. 11. 11. 11. 11. 11. 11. 11.	☐ Change	Addition
πιε	D	□ órre:r	1.2 NA					Į
NAME	ROE, DAVID							
STREET ADDRES					ADDRESS			
CITY+ST-ZIP	BRANDON FL 33511		1.4 CD		T-ZIP		Change	☐ Addition
TITLE		☐ DELETE	2.1 TIT					
NAME	1		2.2 NA	ME	ļ	•		. 1
STREET ADDRES	SS.	•	, 2.3 ST	REE	TADDRESS			•
CITY-ST-ZIP			2.4 C	TY-S	ST-ZIP		Change	Addition
TITLE		DELETE	3.1 10	īŒ	4			, C. Pinoniani
NAME			32 N	AMÉ				` ` .
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. 31			3.4. C	TV 6	ST-ZIP			(R. 85 St. 19 St.
TITLE	3 8 7 7 8 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8			411-5				a north a bassiana
		☐ DELETE	4.1 Π	_	l .		Change	Addition
NAME 3 ()		☐ DELETE		TLE				Addition
		☐ DELETE	4.1 Π 4. 2 N	TLE IAME			t i . ☐ Change	Addition
STREET ADDRES		☐ DELETE	4.1 TT 4. 2 N 4.3 ST	TLE IAME TREE	T ADDRESS		· · ·	
CITY-ST-ZIP	SS 41.		4.1 TT 4. 2 N 4.3 ST 4.4 CI	TLE IAME TREE				
CITY-ST-ZIP	SS Tel.	☐ DELETE	4.1 TT 4. 2 N 4.3 ST 4.4 CI	TLE AME TREE ITY-S	T ADDRESS ST-ZIP		· · ·	
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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 changes on an attachment with an address with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

NAME

STREET ADDRESS

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90053 042 ***150.00