
2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000018267

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1. Entity Name INTERFACE PROPERTIES, INC.



FILED Feb 02, 2004 08:00 AM Secretary of State

Principal Place of Business

2300 GLADES ROAD SUITE 230 W

BOCA RATON, FL 33431

Mailing Address

2300 GLADES ROAD

SUITE 230 W

BOCA RATON, FL 33431

US



01122004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0489400 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOODMAN, KENNETH 2300 GLADES ROAD SUITE 230W BOCA RATON, FL 33431

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B. 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 NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			+	
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOODMAN, DANIEL 2300 GLADES RD #230W BOCA RATON, FL 33431			U00000025979 02/02/04-80127-084 150.00
TITLE Name Street address City-St-Zip	D GOODMAN, CAROL 2300 GLADES RD #230W BOCA RATON, FL 33431			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOODMAN, KENNETH 2300 GLADES RD #230W BOCA RATON, FL 33431		DC	NOT WRITE
TITLE NAME STREET ADDRESS CRTY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				· ·····
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 cath, that I am an officer or director of the corporation or the receipt or or trustee ampowered 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 attack form with an address, with all other like ampowered.				