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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P94000041920 (7) MONDIAL INTERIOR DESIGNS, INC.

FILED							
Apr 13 1998 8:00am	1						
Secretary of State							

EH ED



Principal Place of Business Mailing Address					E ESDELODE LID EGELL DEKLE BOLLE BOLLE BOLLE BERNE BERNE INDIE BOLL BOST 1851			
3302 BAY TO BAY BLVD STE 101 TAMPA FL 33629		3302 BAY TO BAY BLVD STE 101 TAMPA FL 33629				DO NOT WRITE IN THIS SPACE		
US	•	US				3. Date Incorporated or Qualified		
		T				06/06/1994		
	lace of Business	2a. Mailing Address				4. FEI Number Applied For		
21					-	59-3246829 Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State	22					6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip			Cou	ıntry		8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30. Yes No		
	g. Name and Address of Curren	it Registered Agent		Ι.,		10. Name and Address of New Registered Agent		
LAN	MONT, DAVID A			81	Name			
	9 CENTRAL AVE., STE. 202			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
ST.	PETERSBURG FL 33710					1.444.44.4.4		
				83				
				64	City	FL 85 Zip Code		
11.0	10-4	0 - 2 007 4600 Florida Otal	N			FL		
11. 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 office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered age	of and title if applicable (NOI	E Registere	d Age	int signature req	quired when reinstaling) DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC	DELETE	1,1 71			Change Addition		
NAME	PASQUALE, FRANCO A		1.2 N					
STREET ADDRESS	3309 W. WALLCRAFT AVE.				ADDRESS			
CITY-ST-ZIP	TAMPA FL	DELETE	_	ITY-S	T-ZIP	☐ Change ☐ Addition		
TITLE	D COLTABEL OTERUTALA		2.1 Ti 2.2 N			Change C Acadesia		
NAME PERCET ADDRESS	VOLTAREL, STEPHEN M 3309 W. WALLCRAFT AVE.				ADDRESS			
STREET ADDRESS	TAMPA FL				ST-ZIP			
CITY-ST-ZIP TITLE	T	DELETE	3.1 7		51-215	☐ Change ☐ Addition		
NAME	PASQUALE, LUCIA		3.2 N			,		
STREET ADDRESS	84-33 124TH ST				ADDRESS			
CITY-ST-ZIP	KEW GARDENS NY		3.4. CITY-					
TITLE	THE PARTY OF THE P	DELETE	4.1 1			☐ Change ☐ Addition		
NAME			4.21	NAME				
STREET ADDRESS			4.3 STREE		ADÓRESS			
CATY-ST-ZIP			4.4 CITY-5		iT - ZiP			
TRUE		☐ DELETE	5.1 TITLE]	Change Addition		
· Repta			52 N	IAME				
STREET ADDRESS			5.3 \$	TREET	ADDRESS			
CITY-ST-ZIP			54 CITY-		T-ZIP			
TITLE		☐ DELETE	6.1 T			Change Addition		
NAME			6.2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			6.4 C	ITY-\$	T-ZIP			

Thereby certify that the information supplied with this filing does not evallify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is true and acquired and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corpyration or the receiver or true end of properties to be execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if chapter 607, Florida Statutes; and that my name appears in SCANCO A. PROVALE RES. 4/6/9 \$ 8/3-835-4056