

NOTICE: CORPORATION SHALL BE INCORPORATED ON OR AFTER AUGUST 9, 1994.
ANYONE WHO HAS AN INTEREST IN THE STOCK OF THE CORPORATION, INCLUDING ANYONE WHO HAS TO REGISTER THE STOCK

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathem
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000045621 (7)

1. Corporation Name

LOVELL INTERIOR, INC.

FILED
95 JUL 25 AM 9:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

**1761 NW 75 ST
MIAMI FL 33147**

**1761 NW 75 ST
MIAMI FL 33147**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

06/13/1994

2. Principal Place of Business

2a. Mailing Address

21 1761 N.W. 75th STREET

26 1761 N.W. 75th STREET

4. FEI Number

Applied For

Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

City & State

City & State

23 MIAMI, FLORIDA

28 MIAMI, FLORIDA

6. Certificate of Status Desired

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24 33147

25 USA

29 33147

30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LOVELL, EARLIE A
1761 NW 75 ST
MIAMI FL 33147**

**81 Name
EARLIE A. LOVELL**

82 Street Address (P.O. Box Number is Not Acceptable)

83 1761 N.W. 75th STREET

84 City

MIAMI

FL

**85 Zip Code
33147**

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 **EARLIE A. LOVELL**

July 18, 1985

Signature (agent or person named as registered agent and his or her address)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	LOVELL, EARLIE A
STREET ADDRESS	1761 NW 75 ST
CITY, ST, ZIP	MIAMI FL 33147
TITLE	VICE PRESIDENT
NAME	JACQUELINE Y. LOVELL
STREET ADDRESS	1761 N.W. 75th Street
CITY, ST, ZIP	MIAMI, FLORIDA 33147
TITLE	TREASURER
NAME	HANSON A. LOVELL
STREET ADDRESS	1761 N.W. 75th STREET
CITY, ST, ZIP	MIAMI, FLORIDA 33147
TITLE	SECRETARY
NAME	WENDY S. LOVELL
STREET ADDRESS	1761 N.W. 75th STREET
CITY, ST, ZIP	MIAMI, FLORIDA 33147
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL OFFICERS AND DIRECTORS	
1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. 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 stated in Section 119.07(3)(b), 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.

SIGNATURE: **EARLIE A. LOVELL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Earlie A Lovell
7/18/95

(305) 696-4873