

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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96 MAY 10 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000091718 (4)

1. Corporation Name

INTERIOR CONSTRUCTION SERVICES, INC.



Principal Place of Business

854 118TH TERRACE N #16-8
ST. PETERSBURG FL 33716

Mailing Address

854 118TH TERRACE N #16-8
ST. PETERSBURG FL 33716

3. Date Incorporated or Qualified
12/19/1994

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 Same

2a. Mailing Address

26 Same

4. FEI Number
59-3280910

Applied For
Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24

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29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARRINGTON, MICHAEL R
854 118TH TERRACE N #16-8
ST. PETERSBURG FL 33716

81 Name

Same

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

83

84 City

FL

85

Zip Code

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 607.0601, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and 15-day expiration date

(Note: Registered Agent Signature required when first filing)

DATE

5/3/96

12. OFFICERS AND DIRECTORS

TITLE PST
NAME HARRINGTON, MICHAEL R
STREET ADDRESS 854-118 TER N #16-8
CITY-ST-ZIP ST PETERSBURG FL 33716

☐ DELETE

TITLE Sec'y & Treas.
NAME Harrington Michael R.
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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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)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/3/96

813
528-1849

CR2E034 (12/95)