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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P95000011117 (5) DOCUMENT #

1. Corporation Name

GOLDLEAF INTERIORS, INC.

Principal Place of Business Mailing Address) (Califal (12 (212) 2111 2511 4211 4211 4211 4211 1221 1221	
7100 FAIRWAY DRIVE SUITES 48-49 PALM BCH GARDENS FL 33418 US		7100 FAIRWAY DRIVE Suites 48-49 Palm BCH Gardens FL 33418 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
					02/09/1995	
	Place of Business	2a. Mailing Address	 .		4. FEI Number Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			65-0556979 Not Applicat)le
22		27			5. Certificate of Status Desired Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23		26			Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	Countr 30	у	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	g, Name and Address of Curre		301		10. Name and Address of New Registered Agent	
СТ	CORPORATION SYSTEM		81	Name	CT CORPORATION SYSTEM	
1200 SOUTH PINE ISLAND RD.			82	2 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
PL/	ANTATION FL 33324			1	C/O CT CORPORATION SYSTEM	
			83	'	1200 SOUTH PINE ISLAND ROAD	
			84	City	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0!	502 and 607.1508, Florida Statu	ites, the abo	ve-named cr	corporation submits this statement for the purpose of changing its registere	∍ď
office or re	registered agent, or both, in the Statem familiar with, and accept the obli	te of Florida. Such change was	authorized b	ov the carpo	pration's board of directors. I hereby accept the appointment as registered	1
SIGNATURE	(i) (and (i) (iii) and (ii	gation of partition of the same		,,,		
	Signature, typed or printed name of registered a	<u> </u>		jent signature red	equired when reinstatting) DATE	-
12.	OFFICERS AI	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME	ROBUSTELLI, TERRY A	∟ ottejt	1.1 TITLE 1.2 NAME		LJ Coldinge LJ Problin	ÐΠ
STREET ADDRESS	909 AUGUSTA POINT DRIVE	F		T ADDRESS		
CITY-ST-ZIP	PALM BCH GARDENS FL 33		1.4 CITY-			
TITLE	D	DELETE	2.1 TITLE		Change Addition	on
NAME	Robustelli, Lou		2.2 NAME			
STREET ADDRESS	909 AUGUSTA POINT DR.		2.3 STREE	ET ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS FL		2.4 CITY-	-ST-ZIP	Channa T Additi	_
TITLE	İ	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	ขท
NAME STREET ADDRESS	l		3.2 NAME	T ADDRESS		
CITY-ST-ZIP	I		3.3 STREE 3.4 CITY-			
TITLE		DELETE	4.1 TITLE		Change Addition	on
NAME	l		4. 2 NAME	<u>.</u>		
STREET ADDRESS	1		4.3 STREE	1 ADDRESS		
CITY-ST-ZIP			4.4 CiTY-	ST-ZIP		
TITLE	1	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	חכ
NAME !	I		5.2 NAME	1		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - : 6.1 TITLE	ST-ZIP	Change Addition	
NAME			6.2 NAME		benefit """"	
STREET ADDRESS	;			T ADDRESS		
CITY-ST-ZIP			6.4 CITY-1			
14. I hereby c			or the exemp	ption stated	I in Section 119.07(3)(I), Florida Statutes. I further certify that the information ature shall have the same legal effect as if made under eath; that I am an	n
officer or o	director of the corporation or the record to supplie the record to the r	ceiver or trustee empowered to	execute this	report as re	equired by Chapter 607, Florida Statutes; and that my name appears in	

FILED

Jan 29 1998 8:00am

Secretary of State

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