2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P95000028635 **DOCUMENT #**

1. Entity Name

CARRIE B. INTERIOR CONCEPTS, INC.



FILED Mar 17, 2003 8:00 am Secretary of State

	03-17-200) 3 90704	044 *
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					00 WE 198			
Principal Place of Business 3035 LAKELAND HIGHLANDS ROAD LAKELAND FL 33803 US		Mailing Address 3035 LAKELAND HIGHLANDS ROAD LAKELAND FL 33803 US						
2. Principal Pl	lace of Busines	es .	3. Mailing Addres	5\$	4		EKI	AN TRANS NATURAL
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State	City & State Cit		City & State	City & State		26-2XQQ72X		Applied For
Zip		Country	Zip	Cour	ntry	5. Certificate of Status Desired	S8.75 Ac	dditional
	6. Name a	nd Address of Current	Registered Agent			7. Name and Address of New F	Registered Agent	
					Name			
SHARP, C	arrie B 🦟	•			Street Address	(P.O. Box Number is Not Acceptable	<u>. </u>	
6626 CRE	SCENT LAKE	'DRIVE					<u>, </u>	
LAKELAND	FL 33813							
				-	City		FL Zip Co	de
8., The above	named entity s	ubmits this statement fo	r the purpose of char	nging its register	ed office or registe	red agent, or both, in the State of Fl	orida. I am familiar with	, and accept
signature _	ions of egister	ed agent.	1 and	•			3/10/3	
	Signature, typed or	printed name of registered agent	and title if applicate.	(NOTE: Registere	ed Agent signature require	d when reinstating)	DATE I	
After	May 1, 2003	FEE IS \$150.00 Fee will be \$550.00 Torida Department of	f State			9. Election Campaign Fi Trust Fund Contribution	· _ ••	00 May Be ed to Fees
10.		OFFICERS AND	- E	11.		ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTO	RS IN 11
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NAME	SHARP, CAL		_ 33/	NAM	I			_
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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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

