## 2002 UNIFORY BUSINESS REPORT (UBR) FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION

ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P960000 23658

Signature, typed or or nied name of registered agent and title if applicable

SAULO'S INTERIORS, INC.

7850 WEST 28 TH AUE. APT # 115.

DO NOT WRITE IN THIS SPACE

FILED

05-15-2002 90089 032 \*\*\*150 00

May 15, 2002 8:00 am Secretary of State

1	HIALEAH, FL 3.	3018-12104		3. Date Incorporated or Qualified	
2.	Principal Place of Business	2a. Mailing Address 26 7850 WEST. 20	aTHill	4. FEI Number Applied For Not Applied For Not Applicable	-
21	Suite. Apt. #, etc.	Suite. Apt. #, etc.	-	5. Certificate of Status Desired Fee Required	
22	City & State	City & State	LORIOA	Election Campaign Financing     Trust Fund Contribution     Added to Fees	-
23	Zip Country	Zip Co	untry U.S. A.	This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30.    Yes  No	_
24			10. Name and Address of New Registered Agent		
9. Name and Address of Current Registered Agent 81					
1850 WEST 28 TH. Ave. APT \$115			82 Street Address (P.O. Box Number is Not Acceptable) 7850 WEST 28 TH. AUE. APT \$115		
			83		
-1/2 $-1/2$ $-1/2$ $-1/2$			84 City	FI 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 ramiliar with, and accept the obligations of, Section 607.0505. Florida Statutes.

(NOTE Registered Agent signature required when reinstating)

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS Addition 12. DELETE 1.1 TITLE TITLE 850 WEST. 28TH. AUG. APT \$ 115 VALBUENA SAULOA. 1.2 NAME 7850 WEST 28 TH AVE. APT. # 115 NAME 1 3 STREET ADDRESS STREET ADDRESS HIALEAM, FL 33018 1.4 CITY - ST - ZIP Addition CITY - ST - ZIP 2.1 TITLE TITLE VALBUENA RAYSA Y. 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP — Снапое -Addition CITY-ST-ZIF DELETE 3.1 TITLE TITLE 3 2 NAME HAME 3 3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP Addition ☐ Change CITY-ST-ZIP 4 1 TITLE -DELETE TITLE 43 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP Addition Change CITY - ST - ZIP DELETE S 1 TITLE

6 3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 regeiver of 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 for on an arian memory with an address.

5 2 NAME

S 1 TITLE

6 2 NAME

5 3 STREET ADDRESS

5 4 CITY - ST - ZIP

SIGNATURE: 💆

11111

HAMP

TITLE

STREET ADDRESS

CITY-ST-7P

PRESIDENT

☐ DELETE

Change

Addition

CR2F034 (10/97)