## 2007 FOR PROFIT CORPORATION ANNUAL REPORT.

## **DOCUMENT # P96000077388**

1. Entity Name
OPEN HOUSE INTERIORS INC.



FILED Feb 08, 2007 08:00 A Secretary of State

Principal Place of Business

1073 E. PROSPECT RD. OAKLAND PARK, FL 33334 Mailing Address

1073 E. PROSPECT RD. OAKLAND PARK, FL 33334



DO NOT WRITE IN THIS SPACE

02052007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0693449 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

BACK, JOHN 1073 E. PROSPECT RD. OAKLAND PARK, FL 33334

the obligations of registered agention

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

SIGNATURE.	- <del>17</del>				25.07
SIGNATORIES	Signature, type of printed name of registered agent and title li	applicable (NOTE: Registered	Agent signature	required when reinstating)	DATE
		Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000626884 02/15/07-80038-025 150.00
10.	OFFICERS AND DIREC	TORS			
NAME STREET ADDRESS CITY-ST-ZIP	P BACK, EVELYN M 9420 LIVE OAK PL #103 FT LAUDERDALE, FL 33324				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BACK, JOHN C 9420 LIVE OAK PL #103 FT LAUDERDALE, FL 33324				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept