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## FILED Apr 29, 2004 08:00 AM - Secretary of State

	ANNUAL	KEPUKI		<u>.</u>	Secre	tary of State
1. Entity Nam	MENT # P960000790 On Interior, Inc.	082			Secre	tary or state
Principal Plac 131 RIVIERA BONAVENTU		Mailing Address 131 RIVIERA CIR BONAVENTURE, FL 33326	us .			
0	O NOT WRITE	CE	02052004  4. FEI Number 65-06984  5. Certificate of	No Chg-P CF	Applied For Not Applicable \$8.75 Additional Fee Required	
KESSLER, ANDREA 131 RIVIERA CIR BONAVENTURE, FL 33326			DO NOT WRITE IN THIS SPACE			
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 act the obligations of registered agent.  SIGNATURE  Signature when reinstating)  DATE						am familiar with, and accept
After Ma	E NOW!!! FEE IS \$150.00 ny 1, 2004 Fee will be \$550.00			.00 May Be led to Fees		
10.  HITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  THE	OFFICERS AND D  KESSLER, ANDREA  131 RIVIERA CIR  BONAVENTURE, FL 33326  D	RECTORS			1100000138	218 70-019 150.00
NAME STREET ADDRESS CITY-ST-ZIP	KESSLER, DAVE C 131 RIVIERA CIR BONAVENTURE, FL 33326				· (T) (3) 97 97 800	10113 T30 M
THLE MAME STREET ADDRESS CHY-ST-ZIP				DO 1	NOT WRI	TE
TITLE NAME SIREET ADDRESS CHY-ST-ZIP				IN T	HIS SPAC	<b>DE</b> 
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	and the plane have for a second secon	is Elian days and a 120 of			Florida Crab da La La Company	garlie, that the last and a
12. I hereby of indicated of the corr changed,	pertify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empoyon or on an attachment with an address, where	is ning does not quality for the exe ye and accurate and that my signa ered to execute this report as requi fi all other like empowered.	imption stated in Seture shall have the ired by Chapter 60.	ecuon 119.07(3)(i), same legal effect a 7, Florida Statutes;	Fiorida Statutes, I turthe is if made under oath; if and that my name appe	ir certify that the information hat I am an officer or director hars in Block 10 or Block 11 if