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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATI

Sandra R. Morthan

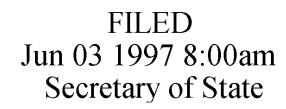
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000079741 (0)

INTERIOR SPACE AFFILIATES, INC.

Principal Place of Business

Mailing Address





3000 HIGH RIDGE ROAD SUITE 12 BOYNTON BEACH FL 33426		3000 HIGH RIDGE ROAD SUITE 12 BOYNTON BEACH FL 33428-8771					
				3. Date Incorporated or Qualified 3a. Date of Last Report NA			
	ace of Business	2a. Mailing Address		4. FEI Number		Applied For	
21 3200 S. CONGRESS		26 3200 S. CONGRESS		45.0696735	1	Not Applicable	
Suite, Apt. #, etc. 22 SULTE 204		Suite, Apt. #, etc. 27 SUITE 204		5. Certificale of Status Desired	\$8.75 Additional Fee Required		
23 Boyuton Bench, FL		City & State  28 BOYNTON BEACH, FL		Election Campaign Financing     Trust Fund Contribution	, , , , , , , , , , , , , , , , , , ,		
Zip 24 <b>3342</b>			Country 30 USA		Yes No	s. 199.032,	
	g, Name and Address of Curren	t Registered Agent	<u></u>	10. Name and Address of New Reg	·		
	valsky, bonnie n		81 Name £	BONNIC N. KOWALSK	4		
	D HIGH RIDGE ROAD		82 Street Ad	ddress (P.O. Box Number is Not Acceptable			
	TE 12		83 20	0 5. CONGRESS	· · · · · · · · · · · · · · · · · · ·		
BOYNTON BEACH FL 33426				vi 200			
			84 City B	116 207	85 Zu	Code	
				MALE A CLAND	FL  °°   🗲	3926	
11. Pursuant t	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s, the above-named c	orporation submits this statement for the pi	urpose 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 large ar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	cito and typed or printed name of repisty educati	nt and title if applicable (NOT)	Registered Agent signature re	quired when reinstating)	4/30/97	<u> </u>	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	DRS IN 12	
TITLE	D	■ DELETE	1.1 YITLE		☐ Change	: 🔲 Addition   है	
NAME	K <b>O</b> WAISKY, BONNIE N		1.2 NAME				
STREET ADDRESS	630 BOCA MARINA COURT		1.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33487		14 CITY-ST-ZIP			[	
TITLE		☐ DELETE	21 TITLE		☐ Change	Addition C	
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2. 4 CITY - S1 - ZIP				
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition	
NAME			3 2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CHTY - ST - ZIP			İ	
TITLE		DELETE	4.1 TITLE		Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY - ST - ZIP				
TITLE		DELETE	S 1 TITLE		☐ Change	☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			54 CITY-ST-ZIP			)	
TITLE		DELETE	61 TITLE		Change	☐ Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 \$1REET ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST - ZIP				
	w cartifu that the information compline	t with this filing does not qualify		ted in Section 119 (7/3)(i) Florida Statutos	I further cortify the	ot 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 receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Blook 13 if changed or on an attachment with an address.