

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000086294

Entity Name: MOORINGS INTERIORS, INC.

FILED
Feb 20, 2004
Secretary of State

Current Principal Place of Business:

C/O EILEEN PLASKY
221 ARAGON AVE, STE 201
CORAL GABLES, FL 33134 US

Current Mailing Address:

GELBER & COMPANY
11450 INTERCHANGE CIRCLE NORTH
HOLLYWOOD, FL 33025 US

FEI Number: 65-0704027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

C/O EILEEN PLASKY
221 ARAGON AVE, STE 201
CORAL GABLES, FL 33133 US

New Mailing Address:

GELBER & COMPANY
11450 INTERCHANGE CIRCLE NORTH
MIRAMAR, FL 33025 US

Name and Address of Current Registered Agent:

PLASKY, ELLEN H
C/O EILEEN PLASKY
3485 N. MOORINGS WAY
COCONUT GROVE, FL 33131 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EILEEN, PLASKY
Address: 3485 N. MOORINGS WAY
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EILEEN PLASKY

PRES

02/20/2004

Electronic Signature of Signing Officer or Director

_____ Date