07-10-2003 90109 006 *** 150.00 P96000086294

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED SEGRETARY OF STATE DIVISION OF CORPORATED S P96000086294 **DOCUMENT#** 03 OCT 15 PM 2:51 1. Entity Name MOORINGS INTERIORS, INC. 55051919 Malling Address Principal Place of Business GELBER & COMPANY C/O ELEEN PLASKY 11450 INTERCHANGE CIRCLE NORTH 221 ARAGON AVE. STE 201 CORAL GABLES FL 33134 HOLLYW000 FL \$5025 US The conditional Black alle time (this in a the alle at the section 2) 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Sulte, Act. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0704027 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PLASKY, ELLEN H Street Address (P.O. Box Number is Not Acceptable) C/O ELLEEN PLASKY 3485 N. MOORINGS WAY **COCONUT GROVE FL 33131** City Zip Code 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 the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change | ☐ Addition THE ☐ Debete TITLE EILEEN, PLASKY NAME 3485 N. MOORINGS WAY STREET ANDRESS STREET ADDRESS COCONUT GROVE FL 33133 CITY - ST-ZIP CITY-ST-24P ☐ Delete 🗋 Change ' 🔲 Addition TITLE MANE STREET ADDRESS STREET ADDRESS CITY-ST-77P CITY-ST-ZIP ☐ Addition _ ~~ Delete TITLE Chance TITLE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition тта Е HAME . NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP DITY-SI-ZP Octob Addition TULE TITLE NAME KAMF STREET ADDRESS STREET ADDRESS CITY-51-72P City-ST-ZIP TITLE Ozleta TITLE ☐ Change Addition NAME MARK STREET ADORESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the examption 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 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 of trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11. NUME REQUIRED SIGNATURE: 人 E OF SIGNING OFFICER OR DIRECTOR



Ronald S. Gelber, CPA

Darlene A. Rogers, CPA

July 21, 2003

Florida Department of State Glenda E. Hood, Secretary of State Division of Corporations PO Box 1500 Tallahassee, Florida 32302

Re:

Moorings Interiors, Inc

Ref no. P96000086294

Dear Sir or Madam:

As accountants for Moorings Interiors, Inc, we are writing to you concerning the notice of \$400 late fee received by our client on your letter of July 11 (copy enclosed.)

Please note that we are the mailing address for Moorings Interiors' annual report. We did not receive the annual report earlier this year. We have records of every client whose annual report is mailed to our office and we did not receive one for Moorings before the May 1 filing deadline. I notice that the mailing address you have for us is "Hollywood" but it should be "Miramar".

When we did receive the second notice two weeks ago, we advised our client to file without delay. They did file immediately and pay the \$150 normal fee. We are respectfully requesting that the \$400 late fee be waived because we never received the prior notice.

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Amy Greenblatt, CPA

Cc: Eileen Plasky, President

Moorings Interiors, Inc.