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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 28 1998 8:00am Secretary of State

DOCUMENT #

P97000002775

European Interior Design, Inc.

Principal Place of Business

Mailing Address

				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				01-10-97	
2. Principal	Place of Business	2a. Mailing Address	- / // //	4. FEI Number	Applied For
21/505	SE40th Street	26 1505 57	40th Suce	1 65-07/7682	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State				0.53-6	·
23 Cape (wro. (7/ 28 Cope Cope			m/ I	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country Zip			Country	8. This corporation owes or has paid the	· · · · · · · · · · · · · · · · · · ·
24 S3904 25 (1.5 A 20 33904 5			30 U.S. 4	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registers	ed Agent
81 Name Toler					
			B2 Street Add	dress (P.O. Box Number is Not Acceptable)	S 1117C
			750	S SE GOLL Stree	9.X
			83	1 0	
] .			84 City	176° C	85 Zio Codo
,4			(2)	he Coval F	L 85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
$((1,1),(2),(1,2),\dots,(2,1)$					
Signature Typed or punted name of regulating agent and tribin applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change
NAME	15 yr 7 1 1 1 5 1		1		LI Change LI Abdition
STREET ADORESS	KITA EVECICINE -C	nciwent	1.2 NAME		
	Rita Erbelding-le Am Reichstog & 81346 Andrechs		1.3 STREET ADDRESS		;
CITY-ST-ZIP TITLE	10 Anciechs	DELETE	1.4 City - ST - ZiP 2.1 Title		Change Addition
NAME	Poter Landwehr Am Reichstery P	La Decem	2 2 NAME		Change C Addition
STREET ADDRESS	An Down of the		2.3 STREET ADDRESS		
CITY-ST-ZIP	82846 Anderfra		2 4 CITY - ST - ZIP		
TITLE	O ESTED THE PROPERTY.	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-7IP	200002504· -04/23/3801012-	452
TITLE		DELETE	41 TITLE	-04/29/9801012-	-008 hange
NAME			4. 2 NAME	***150.00	
STREET ADDRESS			4 3 STREET ADDRESS		,
CITY-ST-ZIP			4 4 CITY-ST-ZIP		
TITLE		☐ DELETE	5 1 TITLE		Addition Addition
NAME			5.2 NAME	,	/D//
STREET ADDRESS			5 3 STREET ADDRESS	~	~ <i> </i> /(// \\\\
City-St-ZIP			5 4 CITY - ST - ZIP		11/00
THLE		☐ DELETE	- 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			A STHEET ADOMESS		
CHY SE 70			64 CHY S1 7P		

6. I note by certify that the information supplied with this liking does not quality for the exemption stated in Section 119 07(3)(i). Florida Statutes 1 further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under outh, that I am an officer or director of the corporation of 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 Block 13 if changed, or or an attachment with an address.

SIGNATURE:

4-17-98

941-549-9499

42E034 (10/97)