2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 18, 2007 08:00 AM Secretary of State DOCUMENT # P97000005098 1. Entity Name ALEXANDRA KARRAM INTERIORS, INC. Principal Place of Business Mailing Address 720 E PALMETTO PARK ROAD 720 E PALMETTO PARK ROAD BOCA RATON, FL 33432 BOCA RATON, FL 33432 CR2E034 (11/05) 04132007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0738640 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent KARRAM, ALEXANDRA DO NOT WRITE 720 E PALMETTO PARK ROAD BOCA RATON, FL 33432 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 accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE KARRAM, ALEXANDRA NAME STREET ADDRESS 720 E PALMETTO PARK ROAD CITY-ST-ZIP BOCA RATON, FL 33432 000000713501 04/26/07-90092-010 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachmen

SIGNATURE:

STREET ADDRESS CITY+ST-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED