

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

FILED  
May 06 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000036297 (4)

1. Corporation Name

INSPIRED INTERIORS INC.



Principal Place of Business

Mailing Address

21 S.W. 5TH WAY  
BOCA RATON FL 33432

21 S.W. 5TH WAY  
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/21/1997

4. FEI Number

65-0747458

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 1080 WALNUT TERRACE

2a. Mailing Address

26 1080 WALNUT TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 BOCA RATON FL

27 City & State

28 BOCA RATON, FL

24 Zip

33486

Country

25 USA

29 Zip

33486

Country

30 USA

9. Name and Address of Current Registered Agent

RATTRAY, RENEE  
21 S.W. 5TH WAY  
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name RATTRAY, RENEE

82 Street Address (P.O. Box Number is Not Acceptable)

1080 WALNUT TERRACE

83

84 City

BOCA RATON

FL

85 Zip Code

33486

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.

SIGNATURE *Renée Rattray* RENEE RATTRAY

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/98

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME RATTRAY, RENEE  
STREET ADDRESS 21 S.W. 5TH WAY  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE VT ☒ DELETE

NAME DELHAES, KATHY  
STREET ADDRESS 9461 AEGEAN DRIVE  
CITY-ST-ZIP BOCA RATON FL 33496

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PS ☒ Change ☐ Addition

1.2 NAME RATTRAY RENEE  
1.3 STREET ADDRESS 1080 WALNUT TERRACE  
1.4 CITY-ST-ZIP BOCA RATON, FL. 33486

2.1 TITLE VT ☒ Change ☐ Addition

2.2 NAME RATTRAY, RICHARD  
2.3 STREET ADDRESS 1080 WALNUT TERRACE  
2.4 CITY-ST-ZIP BOCA RATON, FL. 33486

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE *Renée Rattray*

4/28/98 (S.D. 305-7272)

CR2E034 (10/97)