

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000037111

FILED  
Apr 25, 2003  
Secretary of State

Entity Name: ARJ INTERIORS, INC.

**Current Principal Place of Business:**

1460 NW 97TH AVE.  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

1460 NW 97TH AVE.  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

FEI Number: 65-0746729

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CASSAVITIS, ROBERT  
1460 NW 97TH AVE  
CORAL SPRINGS, FL 33065

**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: D ( ) Delete  
Name: CASSAVITIS, ROBERT  
Address: 1460 NW 97TH AVE.  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP ( ) Delete  
Name: CASSAVITIS, CLAIRE  
Address: 1460 NW 97TH AVE.  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: ROBERT CASSAVITIS

D

04/25/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date