

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2005 8:00 am
Secretary of State

04-06-2005 90117 011 ***150.00

DOCUMENT # P99000011157

1. Entity Name
RALPH ACEVEDO INTERIORS, INC.



Principal Place of Business
**1815 GRIFFIN RD.
SUITE 103
DANIA BEACH, FL 33004**

Mailing Address
**1815 GRIFFIN RD.
SUITE 103
DANIA BEACH, FL 33004**

2. Principal Place of Business
4320 SW 131ST AVE
Suite, Apt. #, etc.

3. Mailing Address
4320 SW 131ST AVE
Suite, Apt. #, etc.

City & State
DAVIE, FL

City & State
DAVIE, FL

03242005 Chg-P CR2E034 (10/03)

Zip Country
33330-4731

Zip Country
33330-4731

4. FEI Number
65-0893764

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 33311-4132**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **ACEVEDO, RALPH**
STREET ADDRESS **1815 GRIFFIN RD.**
CITY-ST-ZIP **DANIA BEACH, FL 33004**

TITLE **D** ☐ Delete
NAME **ACEVEDO, LINDA**
STREET ADDRESS **1815 GRIFFIN RD.**
CITY-ST-ZIP **DANIA BEACH, FL 33004**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **4320 SW 131ST AVE**
CITY-ST-ZIP **DAVIE, FL 33330-4731**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **4320 SW 131ST AVE**
CITY-ST-ZIP **DAVIE, FL 33330-4731**

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 attachment with an address, with all other like empowered.

SIGNATURE: Ralph Acevedo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-05
Date

954-358-2683
Daytime Phone #