

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000021817

1. Entity Name

EXCLUSIVE INTERIORS, INC.



**FILED**  
**Sep 18, 2000 8:00 am**  
**Secretary of State**

09-18-2000 90019 017 \*\*\*150.00

Principal Place of Business

1112 WESTON ROAD STE. 147  
 WESTON FL 33326

Mailing Address

1112 WESTON ROAD STE. 147  
 WESTON FL 33326

2. Principal Place of Business

1112 Weston Road

Suite, Apt. #, etc.

PMB 147

City & State

Weston, FL

Zip

33326

Country

USA

3. Mailing Address

1112 Weston Road

Suite, Apt. #, etc.

PMB 147

City & State

Weston, FL

Zip

33326

Country

USA

4. FEI Number

65-0904165

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

SCHEFLIN, BONNE Z  
 9900 STIRLING ROAD STE. 205  
 COOPER CITY FL 33024

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
 NAME P  
 STREET ADDRESS JACKSON, BRENDA D  
 CITY-ST-ZIP 1112 WESTON ROAD STE. 147  
 WESTON FL 33326

TITLE ☐ Delete  
 NAME V  
 STREET ADDRESS JACKSON, RYAN L  
 CITY-ST-ZIP 1112 WESTON ROAD STE. 147  
 WESTON FL 33326

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE RECEIVED Brenda Jackson

9/12/00

(954)384-9900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment  
#P99000021817  
A0078897

September 12, 2000

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

This letter is being submitted with the 2000 Uniform Business Report filing applications for Exclusive Interiors, Inc. All mail for this company is received at a PMB (private mail box), the first notice of filing was never received and being our first year in business we were unaware of the renewal process, please accept this letter as a request for a late fee waiver. Thank you in advance.

Sincerely,



Brenda Jackson