2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 19, 2004 08:00 AM Secretary of State **DOCUMENT # P99000063938** CRISTINA V & COMPANY INTERIOR DESIGN, INC. Mailing Address Principal Place of Business 20 AUDUBON CAUSEWAY 20 AUDUBON CAUSEWAY LANTANA, FL 33462 LANTANA, FL 33462 04062004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0939415 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent WHITE, WILTON L DO NOT WRITE 625 N FLAGLER DR. 9TH FL WEST PALM BEACH, FL 33401 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. (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and trile if applicable. 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS D TITLE KEOGH, CHRISTINA V NAME ::100000120208 STREET ADDRESS 20 AUDUBON CAUSEWAY 14/19/04-80129-019 150.10 LANTANA, FL 33462 CHY-53-782 TITLE NAME STREET ADDRESS CETY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE 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 cert, 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 charged, or on an afteriment with an address, with all other like empowered.

SIGNATURE

TITLE NAME STREET ADDRESS CITY-ST-ZIP 317LE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

IN THIS SPACE

FILED