2005 FOR PROFIT CORPORATION

AND THE OF PRINTED WATER OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED
Jan 20, 2005 08:00 AM
Secretary of State

ANNUAL REPORT				Jan 20, 2005 08:00 A		
DOCUMENT # P99000063938-]	Seci	retary of State
1. Entity Name CRISTINA V & COMPANY INTERIOR DESIGN, INC.						
Principal Plac	e of Business	Mailing Address	I	1	•	,
20 auduboi Lantana, Fi		20 Audubon Causeway Lantana, Fl 33462			~	
<u> </u>						
DO NOT WRITE IN THIS SPACE						-1.2 = 1.4.2 1,7,1 1,5 1.2 (11 - 1 - 1 - 1 1 1 1 - 1
			CE	01122005	No Chg-P	CR2E034 (10/03)
			<u> </u>	4. FEI Numb 65-093		Applied For Not Applicable
				5. Certificate	e of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Regi	stered Agent		·····		, , , , , , , , , , , , , , , , , , , ,
WHITE, WILTON L			DO NOT WRITE			
625 N FLAGLER DR, 9TH FL WEST PALM BEACH, FL 33401			IN THIS SPACE			
				114	ITIIO OF	ACE
8. The above	named entity submits this statement for the	purpose of changing its register	ed office or register	ed agent, or bo	oth, in the State of Florid	la. I am familiar with, and accept
the obligat	lons of registered agent.					
SIGNATURE Signature, typed or privid name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE						
FILE NOWILL FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				00 May Be ed to Fees		
10.	OFFICERS AND DIRE	CTORS			 	
TITLE NAME	D KEOGH, CHRISTINA V	, , ,				
STREET ADDRESS	20 AUDUBON CAUSEWAY		1			
CITY-ST-ZIP	LANTANA, FL 33462	. –	<u> </u>		11000001	oraca
TITLE NAME			ľ		01721705-6	3003 9- 002 150.0 0
STREET ADDRESS]			
TITLE			-			
NAME			l			
STREET ADDRESS CITY-ST-ZIP			J	DO	NOT WF	RITE
TITLE	- 	7 	- :	INI '	THIS SPA	\CE
name Street address			l	11.4	THIS SEA	10L
CITY-ST-ZIP						•
TITLE			-		·	1
NAME STREET ADDRESS			1			Į.
CITY-ST-ZIP						
TITLE			[· ·-··			
NAME STREET ADDRESS			l			
City-St-Zip			<u> </u>			
indicated of the corp changed,	ertify that the information supplied with this to on this report or adoptemental report is true poration or the deciver or trustee empowers or on an attachment with an appress, with a	illing does not qualify for the exer and appurate and that my signat d to execute this report as requir Il other/like empowered.	mption stated in Secure shall have the street by Chapter 607	ction 119.07(3) ame legal effec , Florida Statute	(i), Florida Statutes. I fut of as if made under oati es, and that my name a	nther certify that the information n; that I am an officer or director ppears in Block 10 or Block 11 if
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