FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (6)**DOCUMENT #** 1. Corporation Name FRANKLIN INTERIORS, INC. Maling Address Principal Place of Business 1747 AVENIDA DEL SOL 1747 AVENIDA DEL SOL **BOCA RATON FL 33432 BOCA RATON FL 33432** 3a. Date of Last Report 3. Date Incorporated or Qualified 01/30/1995 03/01/1991 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0257747 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State \Box Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Country Zio Yes No Fiorida Statutes 30 29 25 24 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent Barbara Street Address (P.O. Box Nur FREEMAN, ROBERT A., P.A. 2601 SO. BAYSHORE DR. 63 STE. 1425 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. Barbara SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CERS AND DIRECTO 13. 12. Change Addition DELETE 1. 1 TITLE DAS TITLE 1.2 NAME Barbaro J. Thoringtor Dean Blud 2 FREEMAN, ROBERT A. NAME 2601 S. BAYSHRE DR #1425 2000 5 1.3 STREET ADDRESS . Ocean STREET ADDRESS Ration Fla 1.4 City - ST-ZiP MIAMI FL CITY - ST - 719 Addition DELETE 2 1 TITLE PĎ TITLE 2.2 NAME MALAVE, FRANKLIN NAME 900 DOGWOOD DRIVE #135 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIF **DELRAY BEACH FL 33483** CITY-ST-ZIP Change Addition DELETE 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CHY - ST - ZiP Addition CITY - ST - ZIP Change DELETE 4 1 THILE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition D: LETE 5 1 TOTLE THILE 5.2 NAME NAME

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5 4 CITY - ST - ZIP

6 I TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[] DELF1E

April 5, 1996 407-750-8560

[] Addition

Change

CR2E034 (12/95)