FILED

03 NOV 21 AM 10: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S39146

1. Entity Name
LIRETTE'S INTERIOR, INC.

Principal Place of Business	Mailing Address
1632 FEATHER TRAIL WEST PALM BEACH, FL 33411	1632 FEATHER TRAIL WEST PALM BEACH, FL 33411

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 85-0304246 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LIRETTE, JOSEPH 737 SW 1 ST AVE BOYNTON BEACH, FL 33426	Name Lirette, Terry Street Address (P.O. Box Number Is Not Acceptable) 1632 Feather trail City West Palm Beach FL Zip Code 33411

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 [signature] Joseph M. Lirette 11/18/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIRETTE, JOSEPH 737 SW 1ST AVE. BOYNTON BEACH, FL 33426 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Lirette, Joseph 1632 Feather trail West palm Beach, Fl. 33411 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S IMBIMBO, RICHARD D 39 SW 9TH TERR BOCA RATON, FL 33486 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200024936802 -11/21/03--01080--021 **61.25 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Lirette, Terry 1632 Feather trail West Palm Beach, Fl. 33411 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

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: [signature] Joseph M. Lirette 561-640-8888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #