


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 29, 2008 8:00 am
Secretary of State

05-29-2008 90198 042 ***150.00

DOCUMENT # S88510 1. Entity Name L & L INTERIORS, INC.					
Principal Place of Business 12748 NW 15TH ST SUNRISE FL 33323			Mailing Address 12748 NW 15TH ST SUNRISE FL 33323		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <i>as above</i>		City & State <i>as above</i>			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent ✓ PLAVNICK, ELIZABETH 12748 NW 15TH ST SUNRISE FL 33323			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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.			4. FEI Number 65-0294767		
SIGNATURE <i>Elizabeth Plavnick</i> <small>Signature, typed or printed name of registered agent and date of application.</small>			5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required DATE <i>4-28-08</i>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees X		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PLAVNICK, ELIZABETH 12748 NW 15TH ST SUNRISE FL 33323 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>Elizabeth Plavnick</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <i>4-28-08</i> (954) 846-8284 <small>Days-Me Phone #</small>		



1st MOORE CR2E034 (10/07)