

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathran
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S96479** (8)

1. Corporate Name

INTERSTYLE, INC.

Principal Place of Business

**1626 N. FEDERAL HWY
FT. LAUDERDALE FL 33305
US**

Mailing Address

**1626 N. FEDERAL HWY.
FT. LAUDERDALE FL 33305
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/25/1991	3a. Date of Last Report 05/01/1994
4. FEI Number 65-0294075	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Fixed Fund Contribution ☐	\$5.00 May Be Added to Fees
8. Does corporation have liability for information law under 11-100.002, Florida Statutes? ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. or Rm.	26. State, Apt. or Rm.
22. City, State	27. City, State
23. City, State	28. City, State
24. City, State	29. City, State
25. City, State	30. City, State

9. Name and Address of Current Registered Agent

**KURKI, HARRY M.
31 PORTSIDE DRIVE
FT. LAUDERDALE FL 33316**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation submits this statement for the purpose of changing the registered office as reported upon its last report to the Secretary of State. I have been authorized by the corporation's board of directors to execute this statement as required agent. I am hereby accepting the responsibility for the information furnished in this statement.

SIGNATURE

12. CURRENTLY LISTED OFFICERS AND DIRECTORS	13. ADDITIONALLY LISTED OFFICERS AND DIRECTORS
NAME P KURKI, PETER J. 2361 NW 69TH CT. FT. LAUDERDALE FL S KURKI, DOROTHY J. 31 PORTSIDE DR. FT. LAUDERDALE FL C KURKI, HARRY M. 31 PORTSIDE DR. FT. LAUDERDALE FL	NAME 1. NAME 2. NAME 3. NAME 4. NAME 5. NAME 6. NAME 7. NAME 8. NAME 9. NAME 10. NAME 11. NAME 12. NAME 13. NAME 14. NAME 15. NAME 16. NAME 17. NAME 18. NAME 19. NAME 20. NAME 21. NAME 22. NAME 23. NAME 24. NAME 25. NAME 26. NAME 27. NAME 28. NAME 29. NAME 30. NAME 31. NAME 32. NAME 33. NAME 34. NAME 35. NAME 36. NAME 37. NAME 38. NAME 39. NAME 40. NAME 41. NAME 42. NAME 43. NAME 44. NAME 45. NAME 46. NAME 47. NAME 48. NAME 49. NAME 50. NAME 51. NAME 52. NAME 53. NAME 54. NAME 55. NAME 56. NAME 57. NAME 58. NAME 59. NAME 60. NAME 61. NAME 62. NAME 63. NAME 64. NAME 65. NAME 66. NAME 67. NAME 68. NAME 69. NAME 70. NAME 71. NAME 72. NAME 73. NAME 74. NAME 75. NAME 76. NAME 77. NAME 78. NAME 79. NAME 80. NAME 81. NAME 82. NAME 83. NAME 84. NAME 85. NAME 86. NAME 87. NAME 88. NAME 89. NAME 90. NAME 91. NAME 92. NAME 93. NAME 94. NAME 95. NAME 96. NAME 97. NAME 98. NAME 99. NAME 100. NAME

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 11-100.002, Florida Statutes. I further certify that the information is true and correct to the best of my knowledge and belief, and I am authorized to execute this statement as required agent. I am hereby accepting the responsibility for the information furnished in this statement.

SIGNATURE:

Peter Kurki
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-95