FOR PROFIT C	CORPORATIONS REPORT	N (UBR)		a d man have	
UNIFORM BUSINESS REPORT (UBR)					
DOCUMENT # V08694			02 DEC 16 PM 4:18		
B+B-Interior Exposing.			TALLAHASSEE, FLORIDA		
DO NOT WRITE IN THIS SPACE			000009518220 12/16/0201031017 **150.00		
2. Principal Place of Business 3032 NW 23+4 Ave Suite, Apt. #, etc.	3. Mailing Address 3032 NW23400 F+Layderd Re . J. 333// Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State Lake II. Ft Landerdale		ale of	4. FEI Number Applied For Not Applicable Not Applicable		
FTLanderdale, Ti	Zip 3331/	Country	5. Certificate of Status	_ 30./3	Additional uired
333// USA 33311		7. Name and Address of Current Registered Agent			
Name W			II: e E. Williams S. s (P.O. Box Number is Not Acceptable)		
DO NOT W		Street Addres			
IN THIS SPACE 688/			81 NW 46 CT		
			yderhill		
8. The above named entity submits this statement f	or the purpose of changing its	registered office or regis	stered agent, or both, in the s	state of Florida.	4
SIGNATURE William &	n. pres.	E: Registered Agent signature requ	illud (ubon rejectation)	12/2/0	
9. This corporation is eligible to satisfy its Intangib Tax filing requirement and elects to do so. (See criteria on back)	le January 1 - N	lay 1 Fee is \$150.00 1, Fee is \$550.00 d UBR is \$61.25 ble to Department of \$	10, Election Car Trust Fund (5.00 May Be dded to Fees
11. OFFICERS AN	D DIRECTORS	TIRE		<u> </u>	·
NAME STREET ADDRESS DRESS dent William William William WW 46	C7	NAME STREET ADDRESS CITY-ST-ZIP	* · · · · · · · · · · · · · · · · · · ·		
CITY-SI-ZIP Lauder 1. // Y	7 00077	TITLE	\		
NAME Beatrice William ST		NAME STREET ADDRESS		Mes	
CITY-SI-ZIP Laudenhill	7 30017	CITY-ST-ZIP	(B)	(0/4.0	<u>, , , , , , , , , , , , , , , , , , , </u>
TITLE Vice Pres. NAME STREET ADDRESS CITY-ST-ZIP Piantation	iams Ju	TITLE NAME	φ		
STREET ADDRESS 4716 NW 644	CT 1177717	STREET ADDRESS CITY: ST. ZIP	DO/ N	NOT WRITE	
TITLE PION + A TEION C		TITLE	IN T	HIS SPACE	
NAME STREET ADDRESS		NAME STREET ADDRESS CITY-ST-ZIP	4 * * * * *		
CITY-ST-ZIP		TITLE		± 2.6	
NAME		NAME STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP		*	
TITLE		TITLE NAME			
NAME STREET ADDRESS		STREET ADDRESS CITY-ST-ZIP		,	

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered. Beatrice Williams

CITY-ST-ZIP



Interior Expo, Inc.

October 25, 2002

Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FI-32314-6327

Dear Sir or Madam:

This letter is to verify that B&B Interior Expo Inc. did not receive the 2002 Corporation Annual Report/Uniform Business form that was due to be filed between January 1 and May 1. You have therefore revoked our authority to transact business in the state of Florida for failure to file this report as required by law.

I am returning the attached reinstate form from the enclosed packet along with the required signatures of the registered agent, officer or director. For all prior filing years, I have never missed a filing due to receipt of the required report forms in an appropriate time span.

A reinstatement fee of \$750.00 is waived due to non-receipt of the two prior uniform business report notices. I have enclosed the completed application and the appropriate fee to file the report without penalty of \$150.00 for a for-profit corporation.

Sincerely, Beatine Williams

Beatrice Williams

Vice President