

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V53945

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SIKAFFY INTERIORS, INC.

**Current Principal Place of Business:**

1845 NW 112 AVENUE # 186  
MIAMI, FL 33172

**New Principal Place of Business:**

1845 NW 112 AVENUE  
186  
MIAMI, FL 33172

**Current Mailing Address:**

1845 NW 112 AVENUE # 186  
MIAMI, FL 33172

**New Mailing Address:**

1845 NW 112 AVENUE  
186  
MIAMI, FL 33172

**FEI Number:** 65-0347015

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SIKAFFY, JOSE MANUEL  
1845 NW 112 AVENUE # 186  
MIAMI, FL 33172 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P,S  
Name: SIKAFFY, JOSE MANUEL  
Address: 1845 NW 112 AVENUE # 186  
City-St-Zip: MIAMI, FL 33172

Title: VP  
Name: SIKAFFY, ELIZABETH B.  
Address: 1845 NW 112 AVE # 186  
City-St-Zip: MIAMI, FL 33172

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOSE M SIKAFFY

PRES

04/30/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date