SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V54373

(8)

INTERNATIONAL HOME CENTER INTERIOR INC.

1727 N.W. 38TH AVE
LAUDERHILL FL 33311
2a. Mailing Address
26
27

FILED Oct 13 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualified

07/27/1992 4. FEI Number

65-0348082

22	27					5. Certificate of Status Desired Fee Required			
	City & State City & State			,		6. Election Campaign Financing \$5.00 May Be			
23		q	28				Trust Fund Contribution Added to Fees		
Zip		Country	Zip		Country	/	8. This corporation owes or has pald the current year Intangible		
24		25	29	 	30		Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registere Agent			
MELDUNG, JACOB					81	81 Name			
	6423 COLLINS AVE. APT. 203					82 Street Address (P.O. Box Number is Not Acceptable)			
MIAMI BEACH FL 33141					83	83			
					84	City	City 85 Zip Code		
						0,	FL 100 Liposob		
Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	Signature, typec		AND DIRECTORS		13.	vgent sig	signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D		, and Date of Orice	DELETE	1.1 TITLE				
NAME	MELDUN	G, JACOB		L_ DLLETL	1.2 NAME		L_ Change L_ Addition		
STREET AD	6409 COLLING AVE. 4000				3 STREET ADDRESS				
CITY-ST-ZIF	MIAMI REACH EL 22141			1.4 CITY-ST					
TITLE				DELETE	2 1 TITLE		Change Addition		
NAME					2.2 NAME		Change T Addition		
STREET ADI	DRESS				2.3 STREET	ADDRES	RESS		
CITY-ST-ZIP					2.4 CITY-ST	- Z (P	10 marie 10		
TITLE		***************************************		DELETE	3.1 TITLE		Change Addition		
NAME					3.2 NAME				
STREET ADI	DRESS				3.3 STREET	ADDRES	RESS		
CITY-ST-ZIP	· _				3.4 CITY-ST	-ZIP			
TITLE				DELETE	4.1 TITLE		Change Addition		
NAME					4.2 NAME				
STREET ADO	DRESS				4.3 STREET	ADDRES	RESS :		
CITY-ST-ZIP					4.4 CITY-ST	-ZIP	·		
TITLE				DELETE	5.1 TITLE		Change Addition		
NAME					5.2 NAME		0000026629 5 0 Addition -10/13/38010680 4 0		
STREET ADD	DRESS				53 STREET	ADDRES			
CITY-ST-ZIP					5.4 CITY-ST	-ZIP	***550.00		
TITLE				DELETE	6.1 TITLE		Change Addition		
NAME	1				6.2 NAME				
STREET ADD	ORESS				6.3 STREET	ADDRES	TESS		
CITY-ST-ZIP					6.4 CITY-ST-	-ZIP	10113		
14. 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 annual report or supplemental another report is true and accurate and this my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.									