

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000077057

**Entity Name:** INTERIORS PURCHASING GROUP, INC.

**Current Principal Place of Business:**

300 SPECTRUM CENTER DR.  
SUITE 500  
IRVINE, CA 92618

**FILED**  
**Apr 25, 2018**  
**Secretary of State**  
**CC7744944085**

**Current Mailing Address:**

300 SPECTRUM CENTER DR.  
SUITE 500  
IRVINE, CA 92618 US

**FEI Number: 59-3408224**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title            PRESIDENT, SECRETARY,  
                  TREASURER, DIRECTOR  
Name            PRIEBE, PETER  
Address        300 SPECTRUM CENTER DRIVE  
                  SUITE 500  
City-State-Zip: IRVINE CA 92618

Title            VP & CONTROLLER  
Name            DE ANDA, JUAN  
Address        300 SPECTRUM CENTER DRIVE  
                  SUITE 500  
City-State-Zip: IRVINE CA 92618

Title            VP  
Name            LARSEN , STACEY  
Address        446 SOUTH CANON DRIVE  
City-State-Zip: BEVERLY HILLS CA 90212

*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: PETER PRIEBE**

**PRESIDENT**

**04/25/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date