

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G76564

1. Entity Name

CAPITOL FURNITURE DISTRIBUTING COMPANY

Principal Place of Business

5225 NORTH WEST 33RD AVENUE
FT LAUDERDALE FL 33309-6302
US

Mailing Address

PO BOX 770070
FT LAUDERDALE COMMERCE CTR
CORAL SPRINGS FL 33077-0070
US

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 770070

Suite, Apt. #, etc.

City & State

City & State
CORAL SPRINGS, FL.

Zip

Country

Zip

Country

33077-0070

U.S.

4. FEI Number

59-2356573

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

5225 N.W. 33RD AVE

City

FT. LAUDERDALE

FL

Zip Code

33309

8. 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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME P
STREET ADDRESS STEINMAN, HARRY
CITY-ST-ZIP 5211 NW 33 ST.
FT. LAUDERDALE FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5225 N.W. 33RD AVE
CITY-ST-ZIP Fort LAUDERDALE, FL. 33309

TITLE ☒ Delete
NAME S
STREET ADDRESS STEINMAN, JOANNA
CITY-ST-ZIP 8122 N.W. 3RD PLACE
CORAL SPRINGS FL 33071

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS STEINMAN, ROBERT
CITY-ST-ZIP 8122 NW 3 PLACE
CORAL SPRINGS FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5225 N.W. 33RD AVE
CITY-ST-ZIP Fort LAUDERDALE, FL. 33309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HARRY STEINMAN 4/17/00 954-485-5000

Date

Daytime Phone #

CR2E034 (9/99)



DO NOT WRITE IN THIS SPACE

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90023 049 ***150.00