## **2007 FOR PROFIT CORPORATION**

## FILED Feb 23, 2007 8:00 am

ANNUAL REPORT								Secretary of State					
DOCUMENT # L98356  1. Entity Name R.T.G. FURNITURE CORP.									02-23-2007	90033 00	08 ***150	.00	
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Principal Plac	e of Busines	s	Mailing Address										
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7in Country			Zip Countr			<del></del>		59-302	9388			t Applicable	
Zip Country		Zip Cour			5. Certificate of Status D			of Status Desired		\$8.75 Add Fee Required			
	6. Name	Registered Agent					7. Name and	Address of New	Registered	Agent			
						Name							
BEYER, DAVID A.						Street A	ddroee //	P.O. Boy Mumb	er is Not Acceptab	Jo\			
% PIPER MARBURY RUDNICK & WOLFE, LLP 101 E KENNEDY BLVD. SUITE 2000						Subbl A	uu 655 (1	.O. BOX NUMB	a is 140t Acceptab	10)			
TAMPA, FL 33602													
						City				FL	Zip Code	<del></del>	
The above named entity submits this statement for the purpose of changing its registered office or reg							rogistor	and account or ha	h in the State of E		fomiliar with	and accept	
	ions of regis		i the purpose of	changing its	registere	ea onice or	register	ed agent, or bo	n, in the State of F	nonda. Tam	i iamisar wilii,	and accept	
	, -	•											
SIGNATURE	Signature, typed	or printed name of registered agent	and tale if applicable	(NOTE	Registere	d Agent signat.	beriuper eru	when reinstating)		DATE			
FIL	E NOW!!!	FEE IS \$150.00		ction Campai	-			.00 May Be					
After Ma	ay 1, 200	7 Fee will be \$550.	00   174	st Fund Contr	ibution.		Add	ed to Fees					
10.		OFFICERS AND	DIRECTORS 11.					ADDITIONS,	CHANGES TO OF	FICERS AN	D DIRECTORS	3 IN 11	
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12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accordance and that my signature shall have the same legal effect as it 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 10 or Block 11 if changed, or on an attachment with an address, with all pring the empowered.

SIGNATURE: Daytime Phone #