

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

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99 SEP 19 PM 1:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000029676  
Corporation Name  
EUROPEAN ROYAL FURNITURE, Inc.

Principal Place of Business Mailing Address

3643 WINDING LAKE CIRCLE  
ORLANDO, FLORIDA 32825

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified  
**APRIL 1, 1998**

4. FEI Number **APPLIED FOR**  Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	26
City & State	27
Zip	28
Country	29

9. Name and Address of Current Registered Agent

NELSON GARCIA-MELLA  
3643 WINDING LAKE CIRCLE  
ORLANDO, FLORIDA 32825

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	P/T/S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	Nelson Garcia-Mella
STREET ADDRESS		1.3 STREET ADDRESS	3643 Winding Lake Circle
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Orlando, Florida 32825
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	<b>500002988265--6</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>-09/15/99--01098--002</b>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<b>*****550.00 *****550.00</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Nelson Garcia-Mella*

President 9/12/99

CR2E094 (11/98)

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**GRAHAM, CLARK, JONES, BUILDER, PRATT & MARKS**  
ATTORNEYS AT LAW

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JEFFREY L. KAPLAN  
HOWARD S. MARKS  
SAMUEL M. NELSON  
JAMES R. PRATT  
GEOFFREY D. WITHERS

September 9, 1999

**VIA FEDERAL EXPRESS**

Ms. Michelle Miligan  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399


PA8000029676

**Re: Profit Corporation Annual Report - 1999**  
**Nelson Garcia-Mella**  
**Our File No. 4994-2**

Dear Michelle:

Enclosed herewith please find check number 008527 in the amount of \$550.00 for the Filing of the enclosed Profit Corporation Annual Report for 1999 for European Royal Furniture, Corp. Per our conversation of this date, I have enclosed a copy of our letter of August 9, 1999, copy of the 1999 Profit Corporation Annual Report and a copy of the unsigned check dated August 9, 1999. I understand that the check, along with the original form, was returned to the 3643 Winding Lake Circle, Orlando, Florida 32825 address. Since our client is out of town, we have been unable to reach him by phone to retain the original document. Per our conversation of this date, I understand you will be able to file this 1999 Annual Report on Friday, September 10, 1999. Please send us confirmation of this filing via fax on this date.

Michelle, I appreciate your help in this matter so much. Should you have any questions, please do not hesitate to give me a call.

Sincerely,  
  
Mrs. Judy Rish  
Legal Assistant to Jeffrey L. Kaplan

vjr  
Enclosures  
FAUSERJUDY\CLIENTS\GARCIA\MILIGAN.909