

FROM :

FAX NO. :

Mar. 25 2004 06:49AM P2

FILED

Jul 22, 2004 08:00 AM
Secretary of State

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000041810	
1. Entity Name NEW CENTURY FURNITURE, INC.	
Principal Place of Business 1790 W. 68 STREET HALEAH, FL 33014	Mailing Address 1790 W. 68 STREET HALEAH, FL 33014
DO NOT WRITE IN THIS SPACE	



07182004 No Chg-P CR26034 (10/00)

4. FEI Number 85-0924005	Applied For Not Applicable
5. Certificate of Status Confirmed <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

VERGARA, JOSE A
1790 W. 68 STREET
HALEAH, FL 33014

**DO NOT WRITE
IN THIS SPACE**

9. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when changing) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	4. Election Campaign Financing Type Cash Distribution <input type="checkbox"/> \$5.00 May be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRO VVERGARA, JOSE A 1790 W. 68 STREET HALEAH, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SETP OSREGON, ERNESTOR 1790 W. 68 STREET HALEAH, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

000000167870
07/22/04-80013-010 550.00

000000167870
07/22/04-80013-011 8.75

12. I hereby certify that the information provided with this filing complies with the exemption stated in Section 19.071, F.S., Florida Statutes. I further certify that the information indicated on this report or supporting 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; that the receiver or trustee is authorized 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 other filers employed.

SIGNATURE: Jose A. Vergara (PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)