2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2005
Secretary of State

DOCUMENT# P94000091538

Entity Name: ABDEN FURNITURE CORPORATION

Current Principal Place of Business:

228 W 29 ST
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

228 W 29 ST
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 65-0541118 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ESCANDELL, JOSE
3730 W 6TH AVE.
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ESCANDELL, JOSE
Address: 3730 W. 6TH AVE.
City-St-Zip: HIALEAH, FL 33012

Title: SD ( ) Delete
Name: ESCANDELL, PEDRO M
Address: 17990 NW 67TH AVE #J
City-St-Zip: MIAMI, FL 33015

Title: VPD ( ) Delete
Name: ESCANDELL, DAIRYS
Address: 17990 NE 67TH AVE #J
City-St-Zip: MIAMI, FL 33015

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: NEIRA, DIOSMIN
Address: 10025 NW OKEECHOBEE RD # 102
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: TD ( ) Change (X) Addition
Name: BRAVO, HECTOR
Address: 3500 W 76 ST# 102
City-St-Zip: HIALEAH, FL 33018

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: PEDRO M. ESCANDELL SD 02/21/2005

Electronic Signature of Signing Officer or Director Date