

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT****FILED**  
**Jul 20, 2007 08:00 AM**  
**Secretary of State****DOCUMENT # P93000041108**

1. Entity Name

95 SHOWROOM CORP.



Principal Place of Business

RENEE 95 SHOWROOM  
820 S.W. 12TH AVENUE  
POMPANO BEACH, FL 33069

Mailing Address

RENEE 95 SHOWROOM  
820 S.W. 12TH AVENUE  
POMPANO BEACH, FL 33069

07132007

No Chg-P

CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0433359

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

SAWCHUK, CLARE  
880 S.W. 10TH AVE  
BAY 8R  
POMPANO BEACH, FL 33069**DO NOT WRITE  
IN THIS SPACE**

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 14, 2007**8. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to FeesIn accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.**10. OFFICERS AND DIRECTORS**TITLE  
NAME PD  
BRAUSER, BERNICE  
STREET ADDRESS 820 SW 12 AVE.  
CITY-ST-ZIP POMPANO BEACH, FL 33069TITLE  
NAME STD  
ZONESHINE, RENEE  
STREET ADDRESS 820 SW 12 AVE  
CITY-ST-ZIP POMPANO BEACH, FL 33069TITLE  
NAME VP  
MENINNO, ROBERT  
STREET ADDRESS 820 SW 12 AVE.  
CITY-ST-ZIP POMPANO BEACH, FL 33069TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP000000769880  
07/20/07-80008-013 158.75**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

DATE 7/14/07