# I hereby 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 all other like empowered.

PRES

#### SIGNATURE: OBED VASQUEZ

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent
Officer/Director Detail :

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.

Title	PD	Title	ST
Name	VASQUEZ, OBED I	Name	FRANCESCHI, MONICA I
Address	2920 S DIXIE HWY	Address	29020 S DIXIE HWY
City-State-Zip:	HOMESTEAD FL 33033	City-State-Zip:	HOMESTEAD FL 33033
Title	VP		
Name	VASQUEZ, KEVIN I		
Address	29020 S. FEDERAL HWY.		
City-State-Zip:	HOMESTEAD FL 33033		

### FEI Number: 81-0574394

Current Mailing Address: 29020 S. FEDERAL HWY. HOMESTEAD. FL 33033

DOCUMENT# P02000107739

29020 S. FEDERAL HWY. HOMESTEAD. FL 33033

**Current Principal Place of Business:** 

#### Name and Address of Current Registered Agent:

PASTRAN, DEBORAH K 333 NE 8 STREET HOMESTEAD, FL 33030 US

SIGNATURE:

Entity Name: HOMESTEAD GENERAL UPHOLSTERY, INC.

## FILED Feb 27, 2014 Secretary of State CC4646783909

Certificate of Status Desired: No

02/27/2014

Date

02/27/20

Date