#### 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.

#### SIGNATURE: OBED VASQUEZ

Electronic Signature of Signing Officer/Director Detail

Title Nan A I Add 034 City Title VP Name VASQUEZ, KEVIN I

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.

# Off

Address

City-State-Zip:

			-	-	
SIGNATURE:					
		Electronic Signature of Registered Agent			
	Officer/Director Detail :				
	Title	PD	Title	ST	
	Name	VASQUEZ, OBED I	Name	FRANCESCHI, MONICA	
	Address	210 N KROME AVE	Address	210 N KROME AVE	
	City-State-Zip:	FLORIDA CITY FL 33034	City-State-Zip:	FLORIDA CITY FL 330	

## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000107739

## Entity Name: HOMESTEAD GENERAL UPHOLSTERY, INC.

## **Current Principal Place of Business:**

210 N. KROME AVE. FLORIDA CITY, FL 33034

#### **Current Mailing Address:**

210 N. KROME AVE FLORIDA CITY. FL 33034 US

### FEI Number: 81-0574394

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

210 N KROME AVE

FLORIDA CITY FL 33034

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

FILED Apr 03, 2018 Secretary of State CC8779783601

Date

Certificate of Status Desired: No

PRESIDENT

04/03/2018 Date