

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 192881

FILED  
Mar 07, 2007  
Secretary of State

Entity Name: KANE FURNITURE CORPORATION

## Current Principal Place of Business:

5700 70TH AVE. NO  
PINELLAS PARK, FL 346654238

## New Principal Place of Business:

## Current Mailing Address:

5700 70TH AVE. NO  
PINELLAS PARK, FL 346654238

## New Mailing Address:

FEI Number: 59-0791370

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOVACK, IRWIN M  
5700 70TH AVE N  
PINELLAS PARK, FL 33781 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: V ( ) Delete  
Name: KLEIN, DANIEL  
Address: 5700 70TH AVE N  
City-St-Zip: PINELLAS PARK, FL 33781

Title: SD ( ) Delete  
Name: LANE, CAROL  
Address: 5700 70TH AVE N  
City-St-Zip: PINELLAS PARK, FL 33781

Title: PD ( ) Delete  
Name: NOVACK, IRWIN M,  
Address: 5700 70TH AVE NORTH  
City-St-Zip: PINELLAS PARK, FL

Title: CD ( ) Delete  
Name: ROTHMAN, THELMA P,  
Address: 5700 70TH AVE NORTH  
City-St-Zip: PINELLAS PARK, FL

Title: D ( ) Delete  
Name: SOLOMON, MARTIN  
Address: 4950 WEST KENNEDY BLVD., #101  
City-St-Zip: TAMPA, FL 33609

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DANIEL KLEIN

V

03/07/2007

Electronic Signature of Signing Officer or Director

Date