FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #**

433152

(6)

OFFICI	E FURNITURE & DESIGN C	ENTER, INC.						
Principal Plac	ce of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·			HOT BYER BID	II BIBLI BIBLI BIF	71 01011 1101
2323 CLEVELAND AVENUE 2323 CLEVELAND AVENUE FT. MYERS FL 33901 FT. MYERS FL 33901			IE		DO NOT WRI	TE IN THIS	SPACE	
					3. Date Incorporated or Qualified		0.1100	
					08/06/1973			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		A	pplied For
21					59-1497093		N	ot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	-		5. Certificate of Status Desired			Additional equired
City & Stal	te	City & State	City & State		6. Election Campaign Financing		\$5.00	May Be
23		28		Trust Fund Contribution			to Fees	
Zip	Country	Zip	Count	ry	a. This corporation owes or has			
24	25 Name and Address of Curren	29	30		Personal Property Tax due Jur			_ No
	g. Name and Address of Currer	ir wedisteled Wastr	8	1 Name	10. Name and Address of New F	10gis1ered	Agent	
BLACK, DAVID W.			ا ا	140,110				
1323 VESPER DRIVE			В	2 Street Add	ess (P.O. Box Number is Not Acceptable)			
FI.	FT. MYERS FL 33901			3				
			"ا	1				
			8	7 7	FL 65 Zip Code			
11, Pursuant office or agent. La	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblice	2 and 607.1508, Florida Statut of Florida. Such change was i ations of, Section 607.0505. Flo	es, the abo authorized b orida Statut	ve-named cor by the corpora es	poration submits this statement for the tion's board of directors. I hereby acc	purpose of ept the ap	of changing i pointment as	ts registered registered
SIGNATURE	Signature typed or printed name of registered agr							
12.	OFFICERS AN		13.	geni signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFF	DATE	D DIRECTOR	DC IN 12
TITLE	PD DELETE		1.1 TITLE	<u> </u>	ADDITIONS/OFFINGES TO OFF	IOERO AIN	Change	Addition
NAME	WILLIS, JOHN K.		1.2 NAME					
STREET ADDRESS	1416 SANDRA DRIVE		1.3 STRE	ET ADORESS				
CITY-ST-ZIP	FT. MYERS FL		1.4 CITY-					
TITLE	STD	☐ DELETE	21 TITLE				Change	Addition
NAME	BLACK, DAVID W.		2.2 NAME				_	****
STREET ADDRESS	1323 VESPER DRIVE		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	FT. MYERS FL		2. 4 DITY	- ST - ZIP				:
TITLE	VO	☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME	-DEL-BIANGO, SHARON - No		3.2 NAME					
STREET ADDRESS	1001-BRANTLEY RD, #410-	17042 Wayzata		T ADDRESS				
CITY-ST-ZIP	-FT. MYERS FL N.Ft.	Myers, Fl 339	73.4. CITY	-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAM	·				
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-					····
TITLE		☐ DELETE	5.1 TITLE	1			Change	Addition
NAME			52 NAME					
STREET ADDRESS				T ADDRESS				
CITY - ST - ZIP			5.4 CITY-				774	
TITLE		☐ DELETE	6.1 TITLE	į			Change	☐ Addition
NAME			6.2 NAME	· · · · · · · · · · · · · · · ·				
STREET ADDRESS			6.3 STREE	T ADDRESS				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental lannual 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 12 or Block 13 if changed, or on an uttagriment with an address.

SIGNATURE:

David W. Black

4/20/98

FILED

Apr 27 1998 8:00am

Secretary of State

941-337-1212