

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90009 029 ***150.00

DOCUMENT # 461913

1. Entity Name

CONCORD UPHOLSTERY INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5608 DOWDY ST

Suite, Apt. #, etc.

3. Mailing Address

5608 DOWDY ST.

Suite, Apt. #, etc.

City & State

HOLLYWOOD FL.

City & State

HOLLYWOOD, FL.

4. FEI Number

59-1560803

Applied For

Not Applicable

Zip

33023

Country

U.S.

Zip

33023

Country

U.S.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.

☐

\$5.00 May Be

Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: P
NAME: PECCI, ALEXANDER
STREET ADDRESS: 5882 S.W. 32ND TERRACE
CITY-ST-ZIP: FT. LAUDERDALE, FL. 33312

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: S
NAME: PECCI, ERICA
STREET ADDRESS: 5882 S.W. 32ND TERRACE
CITY-ST-ZIP: FT. LAUDERDALE, FL. 33312

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IN THIS SPACE**

13. 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alexander Pecci

PRESIDENT 3-11-02 954-983-8444

Date

Daytime Phone #

CR2E034B (12/01)