

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 483851

FILED
Jan 04, 2008
Secretary of State

Entity Name: THE FURNITURE FACTORY SHOWROOM, INC.

Current Principal Place of Business:

4501 N. FEDERAL HIGHWAY
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

4501 N. FEDERAL HIGHWAY
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 59-1621117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, STEVEN B
BROWN'S INTERIOR DESIGN
4501 N. FEDERAL HIGHWAY
BOCA RATON, FL 33431 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: PD () Delete
Name: BROWN, STEVEN B,
Address: 5802 WINDSOR TERRACE
City-St-Zip: BOCA RATON, FL 33496

Title: VD () Delete
Name: BROWN, MURRAY R.,
Address: 1628 U S HIGHWAY #1
City-St-Zip: JUPITER, FL 33410

Title: V () Delete
Name: NADLER, PAMELA,
Address: 5354 VALLEJO TERR
City-St-Zip: DELRAY BEACH, FL 33428

Title: V (X) Delete
Name: ROSS, ROSANN,
Address: 5049 NW 103 AVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: S () Delete
Name: BROWN, DANA S.
Address: 5802 WINDSOR TERRACE
City-St-Zip: BOCA RATON, FL 33496

Title: T () Delete
Name: SABATH, ALLEN
Address: 5372 NW 21ST AVE
City-St-Zip: BOCA RATON, FL 33496

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
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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 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: ALLEN SABATH

TR

01/04/2008

Electronic Signature of Signing Officer or Director

Date