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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 493597

ALL STATE OFFICE FURNITURE, INC.

(9)

FILED Jul 23 1997 8:00am Secretary of State

Principal Place 7200 NW 77H MAMI FL 3315	AVE.	Mailing Address 7200 NW 7TH AVE. MIAMI FL 33150-3608			
	_			3. Date incorporated or Qualified 01/01/1976	3a, Date of Last Report 01/24/1996
		2a. Mailing Address 26 SAM		4. FEI Number 59-1634751	Applied For Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33 \$.	SO 25 USA	Zip 29 3	Country 0	This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No
	9, Name and Address of Curren	t Registered Agent		10. Name and Address of New Reg	istered Agent
SMALL, JOSPEH 81 Name Joseph Small					
6801 NW 46TH CT LAUDERHILL FL 33319 82 Street Address (P) 490x, Number is Not Acceptable)					
			B3		
ļ		4	84 City A L	DER HILL	FL 85 33379
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	SMALL, JOSEPH		1.2 NAME		
STREET ADDRESS	680 N. W. 46TH COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL		1.4 CITY - ST - ZIP		
TITLE	S	DELETE	2.1 TITLE		☐ Change ☐ Addition
NÁME	SMALL, SARA		2.2 NAME		
STREET ADORESS	6801 NW 46 CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL		2 4 CITY ST-ZIP		
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		······································	3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change 🔲 Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		

63 STREET ADDRESS

14. I do 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 annual 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 attachment with an address.