

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 16, 2001 08:00 AM
Secretary of State

DOCUMENT # 511041

1. Entity Name
CASUAL FURNITURE ASSOCIATES, INC.

Principal Place of Business
 1855 GRIFFIN RD SUITE B-200
 DANIA FL 33004

Mailing Address
 1855 GRIFFIN RD SUITE B-200
 DANIA FL 33004

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 PO BOX 562274
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 MIAMI FL

City & State
 MIAMI FL

4. FEI Number
59-1685755
 Applied For
 Not Applicable

Zip Country
 332562274 US

Zip Country
 332562274 US

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PAULEN, KEITH
 1855 GRIFFIN ROAD
 SUITE B200
 DANIA FL 33004

Name
PAULEN KEITH IPRES
 Street Address (P.O. Box Number is Not Acceptable)
1855 GRIFFIN ROAD
 SUITE B200
 City DANIA FL Zip Code 33004

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 **KEITH PAULEN**

01/16/2001

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)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD Delete
 NAME PAULEN, KEITH
 STREET ADDRESS 4318 SW 147TH PLACE
 CITY-ST-ZIP MIAMI FL 33185

TITLE PD Change Addition
 NAME PAULEN KEITH IPD
 STREET ADDRESS 12826 SW 104 PLACE
 CITY-ST-ZIP MIAMI FL 33176

TITLE VD Delete
 NAME PAULEN, TERESA
 STREET ADDRESS 4318 S.W. 147 PL.
 CITY-ST-ZIP MIAMI FL 33185

TITLE VD Change Addition
 NAME PAULEN TERESA AVD
 STREET ADDRESS 12826 SW 104 PLACE
 CITY-ST-ZIP MIAMI FL 33176

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Keith Paulen**

PD 01/16/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/00)