

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 26, 2003 8:00 am**  
**Secretary of State**

02-26-2003 90167 036 \*\*\*150.00

**DOCUMENT # 535029**

1. Entity Name  
**SHOWROOM 84, INC.**



Principal Place of Business  
**3901 NE 2ND AVE  
MIAMI FL 33137  
US**

Mailing Address  
**3901 NE 2ND AVE  
MIAMI FL 33137  
US**



2. Principal Place of Business  
**1855 Griffin Road**

3. Mailing Address  
**1855 Griffin Road**

Suite, Apt. #, etc.  
**B225**

Suite, Apt. #, etc.  
**B225**

☐ CHECK HERE IF MAKING CHANGES

City & State  
**Dania Beach, FL**

City & State  
**Dania Beach, FL**

4. FEI Number **59-1760817**

Applied For  
☐ Not Applicable

Zip  
**33004**

Country  
**USA**

Zip  
**33004**

Country  
**USA**

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

**COLE, LEONARD  
4100 NE 2ND AVE.  
MIAMI FL 33137**

Name  
**Cole, Leonard**  
Street Address (P.O. Box Number is Not Acceptable)  
**1855 Griffin Road, Ste B225**

City  
**Dania Beach** **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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **2/24/03**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
COLE, LEONARD  
3901 NE 2ND AVE  
MIAMI FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**President  
Cole, Leonard  
1855 Griffin Road, Ste B225  
Dania Beach, FL 33004** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DV  
COLE, DIANNE  
3901 NE 2ND AVE  
MIAMI FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Cole, Dianne  
1855 Griffin Road, Ste B225  
Dania Beach, FL 33004** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
GRIMES, DEBORAKA  
3901 NE 2ND AVE  
MIAMI FL 33137** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Grimes, Deborah A  
1855 Griffin Road, Ste B225  
Dania Beach, FL 33004** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
DOMBROSKY, DEAN M  
3901 NE 2ND AVE  
MIAMI FL 33137** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Dombrosky, Dean M  
1855 Griffin Road, Ste B225  
Dania Beach, FL 33004** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**2/24/03**  
Daytime Phone #

CR2E034 (10/02)