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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 592336
 1. Corporation Name
HMF CUSTOM FURNITURE CORP.

Principal Place of Business
 2025 TAFT ST.
 HOLLYWOOD FL 33020

Mailing Address
 2025 TAFT ST.
 HOLLYWOOD FL 33020



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5830 Sheridan St Suite, Apt. #, etc. 22 Hollywood FL City & State 23 33021 Zip		2a. Mailing Address 26 5830 Sheridan St Suite, Apt. #, etc. 27 Hollywood FL City & State 28 33021 Zip		3. Date Incorporated or Qualified 11/03/1978	
24 33021 Country USA		25 Boulevard Country USA		4. FEI Number 59-1861583 Applied For ☐ Not Applicable	
29 33021 Country USA		30 USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent TERKIEL, JOSEPH 3680 NE 201ST ST AYENTURA FL 33180		10. Name and Address of New Registered Agent 81 Name LESLIE TERKIEL 82 Street Address (P.O. Box Number is Not Acceptable) 4800 N 37 ST. 83 Hollywood FL 84 City FL 85 Zip Code 33021		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
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.		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No		7. Signature of Officer or Director 4/28/99 DATE	

SIGNATURE *[Signature]* (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	1.1 TITLE	Leslie Terkiel (President)
NAME	TERKIEL, JOSEPH	1.2 NAME	4800 N 37 st
STREET ADDRESS	3680 NE 201ST ST	1.3 STREET ADDRESS	Hollywood FL 33021
CITY-ST-ZIP	AYENTURA FL 33180	1.4 CITY-ST-ZIP	Hollywood FL 33021
TITLE	PD	2.1 TITLE	DANA Terkiel (Secretary)
NAME	TERKIEL, LESLIE	2.2 NAME	4800 N 37 st
STREET ADDRESS	4800 N 37TH ST	2.3 STREET ADDRESS	Hollywood FL 33021
CITY-ST-ZIP	HOLLYWOOD FL 33021	2.4 CITY-ST-ZIP	Hollywood FL 33021
TITLE	VPD	3.1 TITLE	
NAME	TERKIEL, LESLIE S.	3.2 NAME	
STREET ADDRESS	4800 N 37TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with another like empowered.

SIGNATURE: *[Signature]* **1/20/99 (90121) 7644**

CR2E034 (1/198)