## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 592336** 

Entity Name: HMF CUSTOM FURNITURE CORP.

**FILED** Feb 05, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

9778 NAPOLI WOODS LAND DELRAY BEACH, FL 33446

**Current Mailing Address: New Mailing Address:** 

9778 NAPOLI WOODS LAND 9778 NAPOLI WOODS LANE DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33446

FEI Number: 59-1861583 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

TERKIEL, LESLIE TERKIEL, LESLIE 9778 NAPOLI WOODS LANE 9778 NAPOLI WOODS LAND DELRAY BEACH, FL 33446 US DELRAY BEACH, FL 33446 US

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: LESLIE TERKIEL 02/05/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name:

Address:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition TERKIEL, LESLIE TERKIEL, LESLIE Name: Name:

9778 NAPOLI WOODS LAND 9778 NAPOLI WOODS LANE Address: Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: DELRAY BEACH, FL 33446

Title: Title: (X) Change ( ) Addition ( ) Delete

Name: TERKIEL, DANA Name: TERKIEL. DANA

9778 NAPOLI WOODS LAND 9778 NAPOLI WOODS LANE Address: Address: DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33446 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

HUAYTA, JORGE Name: 9778 NAPOLI WOODS LANE Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Ρ SIGNATURE: LESLIE TERKIEL 02/05/2007