2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2003 8:00 am
Secretary of State
01-24-2003 90057 002 ***150.00

DOCUMENT # F02000002391

1. Entity Name
CANNON CHAIR MANUFACTURING INC.

700013499

Principal Place of Business	Mailing Address
45 STEELWELL ROAD BRAMPTON, ONTARIO CANADA L6T 5P7	45 STEELWELL ROAD BRAMPTON, ONTARIO CANADA L6T 5P7

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number **NOT APPLICABLE** ☐ Applied For ☐ Not Applicable

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
FURNITURE SERVICES UNLIMITED, INC. 2940 42ND AVENUE PALM CITY FL 34990	Name: Street Address (P.O. Box Number is Not Acceptable): 8815 Sonoma Lake Blvd. City: Boca Raton FL Zip Code 33434

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 Refer attached fax please.
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	P CHEUNG, STEPHEN 45 STEELWELL ROAD BRAMPTON, ONTARIO CANADA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NG, CHRISTINE 45 STEELWELL ROAD BRAMPTON, ONTARIO CANADA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/02)

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 REQUIRED CHRISTINE NG January 15/2003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FROM : Dennis Farrar FAX NO. : 5614791876 Jan. 15 2003 09:00AM P1

Attachment

70013499

JAN-14-2003 TUE 02:20 PM CANNON CHAIR MFG FAX NO. 9054543519 P. 01

F02000002391

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F02000002391

1. Entity Name
CANNON CHAIR MANUFACTURING INC.

Dennis
Pls sign on Block 8 and return to me
Thanks D (Asokan) 14th Jan. 03.
Fax: 561-479-1876

Principal Place of Business
45 STEELWELL ROAD
BRAMPTON, ONTARIO
CANADA L6T 5P7

Mailing Address
45 STEELWELL ROAD
BRAMPTON, ONTARIO
CANADA L6T 5P7

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FURNITURE SERVICES UNLIMITED, INC.
2940 42ND AVENUE
PALM CITY FL 34990

Signature pls ↓

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
8815 Sonoma Lake Blvd.
City Boca Raton FL Zip Code 33434

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SIGNATURE Dennis R Farrar, President 1/14/03
Signature, typed or printed name of registered agent and title if applicable DATE

Dennis R Farrar

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Make Check Payable to Florida Department of State

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #