

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name
ROSE UPHOLSTERY, INC.

DOCUMENT #
F51161 (0)

Mailing Address
6310 FLORIDA AVENUE
C/O LEWIS ROSE
TAMPA FL 33604

Principal Place of Business
6310 FLORIDA AVENUE
C/O LEWIS ROSE
TAMPA FL 33604

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/21/1981	3a. Date of Last Report 06/23/1993
4. FEI Number 59-2141024	Applied For Not Applicable
5. Certificate of Status Desired \$8.75 And ☐ Not Requested	6. Election Campaign Financing Trust Fund Contribution ☐
7. Nonprofit Exempt from \$138.75 Supplemental Fee ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. Mailing Address	2a. Principal Place of Business
21 Suite, Apt. #, etc	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

10. Name and Address of New Registered Agent

ALBANO & ASSOCIATES
2108 TAMPA ST
TAMPA FL 33602

'94 Address

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1506 E. Martin Luther King Blvd.
83
84 City Tampa FL
85 Zip Code 33610

11. Pursuant to the provisions of Sections 607.0502 and 607.1506 or Sections 617.0502 and 617.1506, 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 or 617.0503, Florida Statutes.

SIGNATURE

DATE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE P/D	ROSE, LEWIS	11 TITLE	
12 NAME	4008 COACHMAN	12 NAME	
13 STREET ADDRESS	TAMPA FL	13 STREET ADDRESS	
14 CITY - ST - ZIP		14 CITY - ST - ZIP	
21 TITLE S/O	ROSE, NAOMI	21 TITLE	
22 NAME	4008 COACHMAN	22 NAME	
23 STREET ADDRESS	TAMPA FL	23 STREET ADDRESS	
24 CITY - ST - ZIP		24 CITY - ST - ZIP	
31 TITLE		31 TITLE	
32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY - ST - ZIP		34 CITY - ST - ZIP	
41 TITLE		41 TITLE	
42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY - ST - ZIP		44 CITY - ST - ZIP	
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY - ST - ZIP		54 CITY - ST - ZIP	
61 TITLE		61 TITLE	
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY - ST - ZIP		64 CITY - ST - ZIP	

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-05/16/95--01018--021
*****200.00 *****200.00

SCC 5-1-95

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/95

(813)238-0833