

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F66800

FILED  
Apr 05, 2005  
Secretary of State

Entity Name: SPAZIO MODULAR FURNITURE, INC.

**Current Principal Place of Business:**

14700 BISCAYNE BLVD  
NO MIAMI BCH, FL 33181 US

**New Principal Place of Business:**

**Current Mailing Address:**

14700 BISCAYNE BLVD  
NO MIAMI BCH, FL 33181 US

**New Mailing Address:**

FEI Number: 59-2161741

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARENBOIM, SARA  
14700 BISCAYNE BLVD  
NO MIAMI BCH, FL 33181 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BARENBOIM, SARA,  
Address: 3407 NW 16 STREET  
City-St-Zip: MIAMI, FL 33160

Title: D ( ) Delete  
Name: BARENBOIM, JULIO,  
Address: 3407 NE 164 STREET  
City-St-Zip: MIAMI, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BARENBOIM, SARA,  
Address: 20201 E COUNTRY CLUB DR. APT 2309  
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Change ( ) Addition  
Name: BARENBOIM, JULIO,  
Address: 20201 E COUNTRY CLUB DR. APT 2309  
City-St-Zip: AVENTURA, FL 33180

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

SIGNATURE: SARA BARENBOIM

P

04/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date