#### FILE NOW: FILING FEE:AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

### DOCUMENT # F72360

RON'S UPHOLSTERY, INC.

## **FILED**

# Feb 10, 1999 8:00am Secretary of State 02-10-1999 90077 028 \*\*\*150.00



Principal Plac	e of Business	Mailing Address			) ·				
% RON MARGOLIS 138 N. DIXIE HIGHWAY		=	138 N. DIXIE HIGHWAY			O NOT WRITE IN TH	IIC CDACE		
LANTANA FL 33462		LANTANA FL 33462	LANTANA FL 33462		DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed				ı
					(	or Quanteu		·	
3 Oringinal D	Place of Business	2n Mailing Address			03/31/1982 4. FEI Number		· · · ·		1
	race of Business	2a. Mailing Address			"	•	—	pplied For	2
21	, ,	26			59-2425453	<del></del>		lot Applicable	1 :
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired			ز ا	
City & Stat	re	City & State							ľ
<del> </del>		<del></del>	28		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees				
Zip Country			Zip Country		8. This corporation or			1101 003	
24	25	29	30		Personal Property		Yes	□No	
241		f Current Registered Agent	[30]		10. Name and Addres		<del></del>		1
		- Garron Lagran		81 Name	101 1141110 2112 11410		<u></u>	· · · · · · · · · · · · · · · · · · ·	1
MAR	rgolis, ron								
	N. DIXIE HIGHWAY			82 Street Add	iress (P.O. Box Number is	Not Acceptable)		•	
	TANA FL 33462			83		2 197	3 \$10 1 5 to 4 31	. A.V. 1 2.2 4 1981	
				63	· · · · · · · · · · · · · · · · · · ·				
•				84 City	2 (1) (4) (1) (1)		85 Zip	Códe chile	ı
11: Directont	to the provisions of Continue	607 0502 and 607 1509 Elorida 9	Statuton the o	hove named cor	noration submits this states	mont for the ourness	of changing it	e registered	1
office or r	egistered agent, or both, in the m familiar with, and accept the	607.0502 and 607.1508, Florida S ne State of Florida. Such change v ne obligations of, Section 607.0505	vas authorized 5, Florida Stati	bove-flamed corporati the corporati utes.	ion's board of directors. I h	nereby accept the app	ointment as r	egistered	ì
SIGNATURE								i	,
SIGNATURE	Signature, typed or printed name of regi	istered agent and title if applicable	NOTE: Registered	Agent signature require	ed when reinstating)	DATE			١
	Signature, typed or printed name of regi			Agent signature require	ADDITIONS/CHANG	DATE	AND DIRECT	ORS IN 12	í
12.	OFFIC	ERS AND DIRECTORS	13.	·	ADDITIONS/CHANG	GES TO OFFICERS			
12. TITLE	OFFIC PD		13. Έ 1.1 m	ILE			AND DIRECT	ORS IN 12	1000.5%
12. TITLE NAME	PD MARGOLIS, RON	ERS AND DIRECTORS	13. Ε 1.1 Π 1.2 ΝΑ	TLE AME	ADDITIONS/CHANG				1001777 100
12. TITLE NAME STREET ADDRESS	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS	13. E 1.1 III 1.2 NA 1.3 ST	TLE NME REET ADDRESS	ADDITIONS/CHANG				1001777 10010
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARGOLIS, RON	ERS AND DIRECTORS	13 E 1.1 III 1.2 NA 1.3 ST 1.4 CD	TLE  MME  REET ADDRESS  TY-ST-ZIP	ADDITIONS/CHANG		Change	☐ Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS	13. TE 1.1 TH 12.NA 1.3 ST 1.4 CH	TLE  AME  REET ADDRESS  TY-ST-ZIP TLE	ADDITIONS/CHANG				1001 575 100 1000
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS	13. TE 1.1 TH 1.2 NA 1.3 ST 1.4 CH 2.1 TH 2.2 NA	TLE  AME  REET ADDRESS  TY-ST-ZIP  TLE	ADDITIONS/CHANG		Change	☐ Addition	COUNTY AND LOCA
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS	13. TE 1.1 TH 1.2 NA 1.3 ST 1.4 CH 2.1 TH 2.2 NA	TLE  AME  REET ADDRESS  TY-ST-ZIP TLE	ADDITIONS/CHANG		Change	☐ Addition	VOCUES ACCIONO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. TE 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.2 NA 2.3 ST 2.4 CI	TLE  THE TADDRESS  TY-ST-ZIP  TLE  MME  TREET ADDRESS  TTY-ST-ZIP	ADDITIONS/CHANG		☐ Change	☐ Addition☐ Addition☐	COCKET ACCTOR
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS	13. TE 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.2 NA 2.3 ST 2.4 CI	TLE  THE TADDRESS  TY-ST-ZIP  TLE  MME  TREET ADDRESS  TTY-ST-ZIP	ADDITIONS/CHANG		Change	☐ Addition	COCKET POOLOGO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. TE 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.2 NA 2.3 ST 2.4 CI	TLE  TY-ST-ZIP  TREET ADDRESS  TY-ST-ZIP  TREET ADDRESS  TY-ST-ZIP  TLE	ADDITIONS/CHANG		☐ Change	☐ Addition☐ Addition☐	COCIETY FOOLIOUS
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. E 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.2 NA 2.3 ST 2.4 CI E 3.1 TII 3.2 NA	TLE  TY-ST-ZIP  TREET ADDRESS  TY-ST-ZIP  TREET ADDRESS  TY-ST-ZIP  TLE	ADDITIONS/CHANG		☐ Change	☐ Addition☐ Addition☐	COCKET FOOLING
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. E 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 1.5 TE	TLE  REET ADDRESS TY-ST-ZIP TLE WHE REET ADDRESS TY-ST-ZIP TLE WHE	ADDITIONS/CHANG		☐ Change	☐ Addition☐ Addition☐	COUNTY FOOLOGO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. E 1.1 TII 1.2 NA 1.3 ST 1.4 CID 2.1 TII 2.2 NA 2.3 ST 2.4 CI E 3.1 TII 3.2 NA 3.3 ST 3.4 CI	TLE  TY-ST-ZIP  TY-ST-ZIP  TREET ADDRESS  TY-ST-ZIP  TLE  MRE TREET ADDRESS  TY-ST-ZIP  TLE  MRE TREET ADDRESS	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change	☐ Addition☐ Addition☐	Aggregation of the state of the
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. E 1.1 TII 1.2 NA 1.3 ST 1.4 CID 2.1 TII 2.2 NA 2.3 ST 2.4 CI E 3.1 TII 3.2 NA 3.3 ST 3.4 CI	TLE TREET ADDRESS TY-ST-ZIP TLE WME TREET ADDRESS TY-ST-ZIP TLE WME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change	Addition Addition	COCITE TOOLOGO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. E 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI E 4.1 TIT 4.2 NA 1.5 CI ST 1.5	TLE TREET ADDRESS TY-ST-ZIP TLE WME TREET ADDRESS TY-ST-ZIP TLE WME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change	Addition Addition	COUNTY ACCITOTION
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. E 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.2 NA 2.3 ST 2.4 CI E 3.1 TII 3.2 NA 3.3 ST 3.4 CI E 4.1 TII 4.2 NA 4.3 ST	TLE  TREET ADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  TREET ADDRESS	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change	Addition Addition	CONTRACTOR OF THE PROPERTY OF
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET	13. E 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI E 4.1 TIT 4.2 NV 4.3 ST 4.4 CIT	TLE TREET ADDRESS TY-ST-ZIP TLE THE TREET ADDRESS TY-ST-ZIP TLE THE TREET ADDRESS TY-ST-ZIP TLE TTY-ST-ZIP	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change	☐ Addition ☐ Addition ☐ Addition ☐ Addition	A COLUMN TO COLO COLO COLO COLO COLO COLO COLO C
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET  DELET	13. E 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.2 NA 2.3 ST 2.4 CI E 3.1 TII 3.2 NA 3.3 ST 3.4 CI E 4.1 TII 4.2 NA 4.3 ST 4.4 CII 4.4 CI	TLE TREET ADDRESS TY-ST-ZIP TLE THE TREET ADDRESS TY-ST-ZIP TLE THE TREET ADDRESS TY-ST-ZIP TLE	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change ☐ Change	☐ Addition ☐ Addition ☐ Addition ☐ Addition	1 CONTRACTOR OF THE PROPERTY O
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET  DELET	13. E 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 2.4 CI TIT 4.2 NA 4.3 ST 4.4 CIT 5.2 NA E 5.1 TIT 5.2 NA	TLE TREET ADDRESS TY-ST-ZIP TLE THE TREET ADDRESS TY-ST-ZIP TLE THE TREET ADDRESS TY-ST-ZIP TLE TTY-ST-ZIP	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change ☐ Change	☐ Addition ☐ Addition ☐ Addition ☐ Addition	TOO TOO TOO LOCK O
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET  DELET	13. E 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.2 NA 2.3 ST 2.4 CI E 3.1 TII 3.2 NA 3.3 ST 3.4 CI E 4.1 TII 4.2 NA 4.3 ST 4.4 CII 5.2 NA 5.3 ST 5.3 ST	TLE  TREET ADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  TREET ADDRESS	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change ☐ Change	☐ Addition ☐ Addition ☐ Addition ☐ Addition	A COUNTY A COLLOGO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET  DELET	13. E 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 1.4 CIT 4.2 NA 2.3 ST 4.4 CIT 5.2 NA 5.3 ST 1.5 SA CIT 5.2 NA 5.3 ST 1.5 SA CIT 5.4 CIT 5.5 NA 5.5 ST 1.5 SA CIT 5.5	TLE  TREET ADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP THE TADDRESS TY-ST-ZIP	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition	(%)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT	ERS AND DIRECTORS  DELET  DELET	13. E 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.2 NA 2.3 ST 1.4 CIT 5.2 NA 3.3 ST 4.4 CIT 5.2 NA 5.3 ST 1.5 CIT 5.5 NA 5.3 ST 5.4 CIT 6.1 TIT 5.5 NA 5.5 ST 1.5 CIT 6.1 TIT 5.5 CIT 6.1 TIT 6.1	TLE  TREET ADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  TREET ADDRESS TY-ST-ZIP TLE	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change ☐ Change	☐ Addition ☐ Addition ☐ Addition ☐ Addition	TOO THE TOOLOGO
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFIC PD MARGOLIS, RON 3663 MOON VINE CT W P BCH FL	ERS AND DIRECTORS  DELET  DELET	### 13.  ###################################	TLE  TREET ADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  THE TADDRESS TY-ST-ZIP TLE  TREET ADDRESS TY-ST-ZIP TLE	ADDITIONS/CHANG	GES TO OFFICERS	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition	TOOL TOOL TOOL OUT OF THE PARTY

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 all other like empowered.