FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000002094

1. Corporation Name

ABC Home Furnishings, Inc.

REINSTATEMENT 03-04

2. Principal Office Address	3. Mailing Office Address
888 Broadway	same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: New York, New York	City & State
Zip: 10003 Country: USA	Zip Country

4. Date Incorporated or Qualified To Do Business In Florida: 04-22-1997

5. FEI Number: 133276915 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: National Corporate Research, Ltd., Inc.

Street Address (P.O. Box Number is Not Acceptable): 103 N. Meridian St.

Suite, Apt. #, Etc.:

City: Tallahassee State: FL Zip Code: 32301

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02705/04--01063--036 **308.75

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Wayne Kafarelli V.P. Date: 1-28-04

REGISTERED AGENT MUST SIGN

CR2E031 (10/02)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Co-Pres. & Dir.	Evan Cole	888 Broadway	New York, New York 10003
Co-Pres. & Dir.	Paulette Cole	888 Broadway	New York, New York 10003
CFO	David E. Lauber	888 Broadway	New York, New York 10003
Dir.	Jerome Weinrib	888 Broadway	New York, New York 10003

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: David E. Lauber 1/27/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

212-473-3000 x224
Daytime Phone #

ABC
CARPET
&HOME

January 29, 2004

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: Request for Waiver of Reinstatement Fee

Gentlemen:

Please waive penalty fees in the amount of $600 as we never received the 2003 annual report.

Yours very truly,

David E. Lauber,
Chief Financial Officer

888 broadway new york ny 10003 212.473.3000