FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # G75507 (5)HUNT'S UPHOLSTERY, INC. Principal Place of Business Mailing Address 108 WEST HOWRY AVENUE 108 WEST HOWRY AVENUE DELAND FL 32720 DELAND FL 32720 12/21/1983 2. Principal Place of Business 2a. Mailing Address 26 59-2355607 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 City & State City & State 23 28 Zip Country Country Zω 30 24 25 29 9. Name and Address of Current Registered Agent 81 Name HUNT, GERALD DANIEL 108 WEST HOWRY AVENUE 62 **DELAND FL 32720** 83 84 City SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. DELETE 11 TITLE TITLE HUNT, GERALD DANIEL NAME 1.2 NAME 108 W HOWRY AVE STREET ADDRESS 1.3 STREET ADDRESS DELAND, FL 00000 1.4 CHY-S1-ZIP CITY-ST-ZIP

FILED Apr 28 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XX Yes No Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) **B5** Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, 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, Florida Statules. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition DELETE Change Addition 21 1IILE TITLE HUNT, LARRY 2.2 NAME NAME 108 W. HOWRY AVE. 2.3 STREET ADDRESS STREET ADDRESS **DELAND FL** CITY-ST-ZIP 2. 4 CITY-ST-7IP DELETE Change Addition 3 1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 33 STREFT ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- 7IP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 64 CITY-ST-7IP 14. Thereby 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 suppliemental 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

UL 21-90