

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G78728

FILED
Jan 19, 2009
Secretary of State

Entity Name: ROBBINS OFFICE FURNITURE, INC.

Current Principal Place of Business:

5811 RAVENSWOOD RD.
FT. LAUDERDALE, FL 33312 US

New Principal Place of Business:

Current Mailing Address:

5811 RAVENSWOOD ROAD
FT LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 65-0595838 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TATARKA, ELAINE C.
1300 SOUTHWEST 2ND ST.,
BOCA RATON, FL 33486 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: PD () Delete
Name: TATARKA, ELAINE C PD
Address: 1300 SW 2ND ST
City-St-Zip: BOCA RATON, FL 33486 US

Title: VP () Delete
Name: TATARKA, KEN A VP
Address: 1300 SW 2ND STREET
City-St-Zip: BOCA RATON, FL 33486 US

Title: VP () Delete
Name: TATARKA, KEVIN A VP
Address: 1300 SW 2ND ST
City-St-Zip: BOCA RATON, FL 33486 US

Title: TD () Delete
Name: BUNTING, KIM A TD
Address: 7601 W COUNTRY CLUB BLVD
City-St-Zip: BOCA RATON, FL 33487 US

Title: S () Delete
Name: TATARKA, SCOTT E S
Address: 10223 SW 51 ST
City-St-Zip: COOPER CITY, FL 33328 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: KIMBERLY BUNTING

TD

01/19/2009

Electronic Signature of Signing Officer or Director

_____ Date