2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 16, 2004 08:00 AM Secretary of State DOCUMENT # J19596 Entity Name BEST UPHOLSTERY, INC. Principal Place of Business Mailing Address 1165 S.W. 1ST WAY 1165 S.W. 1ST WAY DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 DO NOT WRITE IN THIS SPACE 02112004 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 59-2698273 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent सम्बद्धनान् । १४८ व्यवस्थात् १८ हेन्स १९४४ १९ हार्गन्य १८ वरणान्य १८ वर्षास्य । सम्बद्धनान्य १८ हार्या १८ वर्षास्य १८ ४ वर्षास्य १८ वर्षास्य १८ वर्षास्य । ZEEV, MOSHE DO NOT WRITE 1165 S.W. 1ST WAY DEERFIELD BEACH, FL 33441 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE ZEEV. MOSHE NAME STREET ADDRESS 1165 S.W. 1ST WAY U00000054484 CITY-ST-ZIP DEERFIELD BEACH, FL 33441 TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. 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 cartify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. MOSHE ZEEV 2, 13 04 954 47883 07
RECTOR

SIGNATURE: