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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J53659

(5)

FURNITURE CATALOGUE GALLERY, INC.

. . FILED Apr 22 1998 8:00am Secretary of State



Deinainal Dina	- of Duninger	Mollon Address			Q[Q[]
Principal Place of Business Mailing Address					
1418 WEST 23RD STREET 1418 WEST 23RD STREET PANAMA CITY FL 32405 PANAMA CITY FL 32405					
FAIRMIN CITT FE 02400		FARMA CITTE SCRA		DO NOT WRITE IN THIS SPACE	
i				3. Date Incorporated or Qualified	
ĺ				01/22/1987	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2765824	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	ırrent year İntangible
24	25		30	Personal Property Tax due June 30.	Yes No
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
MYRA JONES			81 Name		
1418 WEST 23RD STREET			B2 Street Add	dress (P.O. Box Number is Not Acceptable)	
Panama City FL 32405					
1			83		
}			84 City		85 Zip Code
			GH City	FI	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
office or registered agent, 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 Statutes.					
SIGNATURE					
GIGINATURE	Signature, typed or printed name of registered		Registered Agent signature requ	ired when reinslating) DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	DP	DEFELE	1.1 TITLE		Change Addition
NAME	JONES, MYRA		1.2 NAME		
STREET ADDRESS	1418 WEST 23RD ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL		1.4 CITY-ST-ZIP		
) TITLE	D	☐ DELETE	2.1 TITLE		Change . Addition
NAME	JONES, MYRA		2.2 NAME		
STREET ADDRESS	1418 W. 23RD ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL		2 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		·····	3.4. City-St-ZiP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		ĺ
STREET ADDRESS			4.3 STREET ADDRESS		.
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE	· · · · · · · · · · · · · · · · · · · 	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		i
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-7IP		
	sertify that the information supplie	d with this filing does not qualify to		Section 119 07(3)(i) Florida Statutes, Lifurther of	erlify that the information

indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 119.07(3)(). 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.

ICNATIBE

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