Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90105 042 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # .160337**

1. Corporation	Name				
CONTEMPORARY FURNITURE AND DESIGN, INC.					
O O I I I E I I				# (###################################	HER BIRLER BROKE BROKE BROKE HER
Principal Place	of Rusiness	Mailing Address			HORY MINUS BYDYL MINUS BYDYL INDI
6108 28TH ST E   6108 28TH ST E   BRADENTON FL 34203   BRADENTON FL 34203					
US US				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualifed	
Ì				03/05/1987	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2770555	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	•	City & State	*	6. Election Campaign Financing	<b>\$5.00</b> May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year in	
24 ·	25	29	30	Personal Property Tax.	☐ Yes ☐ No
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent					
81 N					
SALSMANN, PERRY L			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
4384 RAYFIELD DRIVE			OI Street Addi	ress (1.0. box rumbor to recriscopiasio)	
SAR	ASOTA FL 34243		83	The state of the s	
			-		85 Zip Code
			84 City	FŁ	_ [
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.					
office or re	egistered agent, or both, in the State	e of Florida. Such change was au	thorized by the corporation	on's board of directors. I hereby accept the appo	intment as registered
l	\/	en L. DALZMAL	INCASOLE	2/10	199
SIGNATURE	Signature, typed or printed same of registered age		Registered Agent signature require		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	SALZMANN, PERRY		1.2 NAME		
STREET ADDRESS	4384 RAYFIELD DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BYNUM, JAMES R		2.2 NAME		
	3403 12TH AVENUE, W.		2.3 STREET ADDRESS		
STREET ADDRESS	BRADENTON FL				
CITY-ST-ZIP	PRADEITION FL	☐ DELETE	2. 4 CITY-ST-ZIP		☐ Change ☐ Addition
			3.2 NAME		
NAME			■ O.Z. PWWC		
STREET ADDRESS			0.0 0	,	
			3.3 STREET ADDRESS		
CITY-ST-ZIP		Delete		a said treet t	☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE	and the second s	☐ Change ☐ Addition
TITLE NAME		☐ DELETE	4.1 TITLE 4.2 NAME	The state of the s	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		☐ Change ☐ Addition

CITY-ST-ZIP 14. 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 certify that the information indicated on this annual report or supplemental 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 certify 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 attackment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS