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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J80709

(5)

MALCOLM FURNITURE CENTER, INC.

Principal Place of Business

Mailing Address

6718 14TH STREET WEST

6718 14TH STREET WEST

FILED Apr 29 1997 8:00am Secretary of State



BRADENTON FL 34207				i	BRADENTON FL 34207-5806										
•											ļ	3. Date Incorporated or Qualified 07/01/1987		ate of Last F 22/1996	Report
2.	Principal Pl	Principal Place of Business					2a. Mailing Address					4. FEI Number		A	oplied For
21						26						59-2825314		N	ot Applicable
22	Sulte, Apt. #, etc.					Suite, Apt. #, etc.						5. Certificate of Status Desired See Required Fee Required			
23	City & State	State				City & State					•	Election Campaign Financing Trust Fund Contribution			May Be to Fees
	Zip	Country				Zip Cou			Country	try		8. This corporation has liability for intangible tax under s. 199.032,			
24			25		29			30					Yes		
9, Name and Address of Current Registered Agent									ı 		0. Name and Address of New Re	gistered	Agent		
HEDRICK, STANLEY MONT								81	Name	;					
6718 14TH ST. WEST							82 S			Street	at Address (P.O. Box Number is Not Acceptable)				
BRADENTON FL 34207									83				 		
															
									84	City			FL	85 Zip	Code
11	Pursuant to office or re agent. I ar	o the provis agistered ag m familiar w	ions jent, ith, a	of Sections 607.0! or both, in the Sta nd accept the obl	i02 and le of Fic gations	607.1 orida S of, So	508, Florida Stat Such change was ction 607.0505,	tutes, this author Florida	ne abovi prized by Statutes	e-named the corp s.	d corporal rporation's	tion submits this statement for the s board of directors. I hereby acce		of changing i	ts registered registered
SI	GNATURE .			·····							<u></u>				
12		Signature, typed	or pro	nted name of registered a OFFICERS A					13.	int signature	re required wi	tion reinstalling) ADDITIONS/CHANGES TO OFFICE	DATE	DIRECTOR	2C INI 12
TIT		PD		OIT IOLIIS A			DELETE		1.1 TillE		1	ADDITIONS/OFFANGES TO OFFI	JEIIO AIVI	Change	Addition
NA.	1		. S1	ANLEY MONT					1.2 NAME					_ •	
	REET ADDRESS			TREET W.					1.3 STREET	ADDRESS					
	Y-ST-ZIP	BRADEN							1.4 CITY - S		1				
TIT		STD					☐ DELE1E		2.1 TITLE		1		• • • • • • • • • • • • • • • • • • • •	Change	Addition
NA	ME	HEDRICK	(, G/	AIL ERVIN				1	2.2 NAME						
\$TI	REET ADDRESS			TREET W.					23 STREET	ADDRESS	1				
CIT	Y-ST-ZIP	BRADEN	TON	FL					2 4 CHY-:	ST - Z IP					
TIT	LE						DELETE		3.1 TITLE					☐ Change	Addition
NA	ME .								3.2 NAME						
ST	REET ADDRESS							I	3.3 STREE1	ADDRESS	-				
	Y-ST-ZIP							-	3.4. CITY -	S1-21P					
TIT							DEFELE		4.1 TITLE					Change	☐ Addition
NA	- 1								4. 2 NAME		ŀ				
ST	REET ADDRESS								4.3 STREFT						
	Y-ST-ZIP						- District		4.4 CHY- S	I - 7IP				Channe	Addition.
- 111							☐ DELETE		5.1 THLE					☐ Change	Addition
NA								1	52 NAME		i				
	REET ADDRESS								5.3 STREET						
CIT	Y-ST-ZIP						DELETE		5.4 City - S 6.1 Title	II-ZIP	 -			Change	Addition
							End present				}			L onunge	M Monton
NA CT									6.2 NAME	ADODESO					
STREET ADDRESS									6.3 STREET ADDRESS						
CIT	Y-ST-ZIP							1	6.4 CITY - S	1-ZIP	1				

I do 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 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.