2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K11729

Mar 26, 2009 Secretary of State

Entity Name: FURNITURE SYSTEMS PLUS, INC.

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 350527 1840 NW 65TH AVE. FT. LAUDERDALE, FL 333350527 PLANTATION, FL 33313 **Current Mailing Address: New Mailing Address:** P.O. BOX 350527 FT. LAUDERDALE, FL 333350527 FEI Number: 59-2699255 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BERHANE, TSEGAI BEMNET 13154 SW 25TH PLACE **DAVIE, FL 33325** 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BERHANE, TSEGAI BEMN, ET Name: Name: P.O. BOX 350527 N/A Address: Address: City-St-Zip: FT. LAUDERDALE, FL 333350527 City-St-Zip: () Delete Title: Title: () Change () Addition Name: BERHANE, MEHRET Name: P.O. BOX 350527 Address: Address: FORT LAUDERDALE, FL 333350527 City-St-Zip: 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.

Ρ SIGNATURE: BERHANE MEHRET 03/26/2009

FILED