

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91069 044 ***150.00

DOCUMENT # K15860

1. Entity Name

CONTEMPORARY FURNITURE & FRAMING, INC.

A0069007



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

844 SCOTT DRIVE
 WEST PALM BEACH FL 33415

844 SCOTT DRIVE
 WEST PALM BEACH FL 33415

2. Principal Place of Business

3. Mailing Address

6419 HUDSON BAY LANE

6419 HUDSON BAY LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKE WORTH, FL. 33466

City & State

LAKE WORTH, FL.

4. FEI Number

65-0042036

Applied For

Not Applicable

Zip

Country

33466

PALE BEACH

Zip

33466

Country

PALE BEACH

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FOX, CINDY L.
 844 SCOTT DRIVE
 WEST PALM BEACH FL 33415

Name

CINDY L. FOX

Street Address (P.O. Box Number is Not Acceptable)

6419 HUDSON BAY LANE

City

LAKE WORTH

FL

Zip Code

33466

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.

SIGNATURE

CINDY L. FOX

CINDY L. FOX

April 28, 2001

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST ☐ Delete
 NAME FOX, CINDY L.
 STREET ADDRESS 844 SCOTT DRIVE
 CITY-ST-ZIP WEST PALM BEACH FL

TITLE PST ☒ Change ☐ Addition
 NAME FOX, CINDY L.
 STREET ADDRESS 6419 HUDSON BAY LANE
 CITY-ST-ZIP LAKE WORTH FL. 33466

TITLE D ☐ Delete
 NAME FOX, CINDY L.
 STREET ADDRESS 844 SCOTT DRIVE
 CITY-ST-ZIP WEST PALM BEACH FL

TITLE D ☒ Change ☐ Addition
 NAME FOX, CINDY L.
 STREET ADDRESS 6419 HUDSON BAY LANE
 CITY-ST-ZIP LAKE WORTH FL. 33466

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CINDY L. FOX

CINDY L. FOX

April 28, 2001 (561) 471-5312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)